Form Approved: OMB No. 0910-0498; Expiration Date: 3/31/2015

Department of Health and Human Services Food and Drug Administration Center for Food Safety and Applied Nutrition	**FOOD EXPORT CERTIFICATE APPLICATION**	Date

1. Food Manufacturer Information

Manufacturer name	Doing business as name (*If other than "Manufacturer name" to left, and you wish this name to appear on the export certificate*)
State License/Registration number	Address
Contact person name	
Contact phone/fax	City / State or Province / ZIP/postal code
Contact email	Country

2. Exporting Company Information (if applicable)

Export company name	
State License/Registration number	Address
Contact person name	City / State or Province / ZIP/postal code
Contact phone/fax/or email	Country

3. Shipment Description

Product	*Common Name*	*Manufacturer*	*Description/Comments*

Continue on additional page(s) as needed.

4. Intended Destination of Shipment (Country)

Name of country

5. Send Certificate To

☐ Manufacturer ☐ Distributor ☐ Other (*provide the following information*)

Firm name	Address
	City / State / ZIP/postal code
Contact person name	Country

6. Send Certificate Via

Carrier name (*U.S. Mail, FedEx, etc.*)	Account number (*If applicable*)

7. Fees

Fees are $10 per certificate, and will be billed upon receipt of this application.	☐ Copies of certificate: _____ (*Number*) x _____ (*Fee/copy*) = Total $ _____

PSC Publishing Services (301) 443-6740 EF

8. Label(s)

Attach an original or an electronic copy of any applicable product label(s). A fax copy is acceptable only if it is readable.

9. Verification

The undersigned verifies that all ingredients are approved for use by FDA or appear on the GRAS list, and each product is intended for human consumption and is available for sale in the U.S. without restriction.

Signature	Name and Title	Date

Department of Health and Human Services
Food and Drug Administration
Center for Food Safety and Applied Nutrition

FOOD EXPORT CERTIFICATE APPLICATION Instructions

For Manufacturers/Distributors

1. The Manufacturer/Distributor fills out the application information describing the consignment, manufacturer (note that different processing facilities of the manufacturer may be listed on the table describing the foods), where and how to send the certificate, optional information as needed, and applicant signature, name, and date.

2. The Manufacturer/Distributor submits the application (by mail, fax, email), along with labels as applicable. For contacts, refer to *http://www.fda.gov/Food/InternationalActivities/Exports/ExportCertificates/UCM151486.htm*

For FDA Officials

3. FDA Official reviews the application to be sure all the blanks are filled in properly, verifies manufacturer's license or registration, and investigates inspection data on the listed products.

4. The Official may require an inspection prior to issuance of the export certificate.

5. The Official prints the Certificate on watermarked Department letterhead, assigns a unique registration number and expiration date, signs, dates, seals, and issues the Certificate as indicated.

6. The Official maintains in his records an identical copy of the signed Certificate, marked "Copy" *for a period of at least two years*.

7. In the event that the Manufacturer fails to comply with the law as stated on the Certificate, the Official will reject the application and promptly notify the Manufacturer that the Certificate cannot be issued.

After the Certificate Has Been Issued

8. The Manufacturer/Distributor forwards the Certificate to the foreign Importer and verifies that it is acceptable.

9. If the Certificate is not acceptable, the Exporter notifies the FDA Official that the certificate has not been accepted by the Importer, and the Official will promptly attempt to reconcile the issue with the Importer.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF ADDRESS BELOW.

The burden time for this collection of information is estimated to average 1 hour per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

Department of Health and Human Services
Food and Drug Administration
Office of Chief Information Officer
Paperwork Reduction Act (PRA) Staff
1350 Piccard Drive, Room 400
Rockville, MD 20850

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number."