Draft Screenshots and Instructions for Form FDA 3613g

Firms exporting products from the United States are often asked by foreign customers or foreign governments to supply a written export certification for products regulated by the U.S. Food and Drug Administration (FDA). FDA has developed a draft electronic form, Form FDA 3613g, for firms that wish to request specific types of export certificates for collagen, gelatin, and other animal-derived products. Form FDA 3613g will be part of the Certificate Application Process (CAP), which a web-based application through which FDA receives, processes, and tracks applications for export certification.

The screens below depict the process through which industry users may apply for certain types of export certification that may be required by importing countries for animal-derived products. Please note that there are separate processes for applying for other types of export certification for food and cosmetics.

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Enter New Application Workflow Screen #1: Select Enter New Application

FURLS CAP Certificate A	pplication	Process	(CAP)					
Certificate Application P	Process (C	AP)						0
CAP Home								
CAP Home	Welcome t	o the Certi	ficate Applicatio	n Process	(CAP)			
Enter New Application	OMB Number: PAPERWOR Welcome to th check with the email notification Please Note: 1 You have access	COPID-XXXX KK REDUCTION a sutomated proce country of destina on as to the status The system will au to the following a	ACT ass for requesting a Health tion that all import requirer of your request. tomatically timeout if there pplications. You may view,	Certificate for the ments are met. Als is no activity with clone, or edit an o	OMB Expiration Date: export of bulk gelatin, and collagen to please note your application num in 30 minutes. existing application by clicking on the	XXXXXXXXXX for human consum ber. Include this nur e appropriate icon is	ption. Please note it is yo mber with all inquiries. Yo n the Action column.	ur responsibility to u will receive an
	Show Expire	ed Draft applications	5.					
	Show 10	▼ entries		Export to E	ixoel		Filter:	
	Actions	Application Number ↓₹	Application Status	Approval Number 1	Certificate Type	Date of Application ↓↑	Facility Name ↓↑	Country ↓↑
	۲) ۲	2017-00040	Approved Pending Review		EU-Chicken Collagen	06/09/2017	Chengzhi Life Science Co., Ltd	GREECE
	 	2017-00039	Approved	3007004025	EU-Gelatin	06/09/2017	Chengzhi Life Science Co., Ltd	IRELAND
	<u>ی</u> ک	2017-00038	Approved Pending Review		EU-Collagen	06/09/2017	Chengzhi Life Science Co., Ltd	FRANCE
	۵/ 4	2017-00034	Approved	12	SRM-Gelatin	06/08/2017	Brendan's Company	BANGLADESH
	•1	2017-00029	Approved	3007004025	EU-Collagen	06/08/2017	Chengzhi Life Science Co., Ltd	SPAIN
	• <i>•</i>	2017-00025	Return for Action	3007004025	EU-Collagen EU-Gelatin	06/09/2017	Chengzhi Life Science Co., Ltd	SPAIN

To submit a new application, select the link 'Enter New Application' from the page 'CAP Home Main Menu'. Note: The OMB control number and expiration date will be updated upon OMB approval.

Screen #2: Type of Facility

FURLS CAP Certificate A	Application Process (C	CAP)		
Enter New Application				⊖ 0
CAP Home > Enter New Application > B	Business Information			
CAP Home	Business Information	Country/Product Information	Review	Signature
Enter New Application	Type of Facility			
	Facilities that manufacture, process, pa apply in the CAP Bulk Gelatin and Colls	ck, or hold food for consumption in the agen Module, unless an exemption app	U.S. must be registered in the Food Fa lies under 21 CFR 1.228.	cility Registration Module in order to
	Please select one of the following optio	ns to identify the Manufacturer:		
	FFR Registration			
	 FEI Number DUNS Number 			
	< Previous			Save and Exit Next >

After you select the 'Enter New Application' from the main menu page, the 'Type of Facility' screen will be displayed. External users will have the option of identifying the manufacturers/processors of the products by the Food Facility Registration number, FEI number, or DUNS number.

Screen #3: Business, Contact, and Manufacturer Information

er New Applica	ation						
P Home > Enter New Applic	ation > Business Information						
	Business Informati	ion	Country/Product Information	Review		Signature	
	Business Informati	ion					
	Parent Company Information ar Facility Registration Module fror	nd Manufacturer Addres: m the FURLS home pag	s are prepopulated from the Food Fa ge.	cility Registration Module. If yo	ou wish to update this inf	ormation, you may log	in to the
	Parent Company Inform	nation					
	Parent Company Name	Example Facility	2	Country	UNITED STATES		
	Doing Business As (Optional)			Address Line 1	32 Garden St		
				Address Line 2 (Optional)			
				ZIP or Postal Code	07446		
				City	Ramsey		·
				State or Province	New Jersey		
	Contact Information						
	First Name	Example		Telephone	001 240	4029539	Ext
	Last Name	Name		Fax (Optional)	Country Area	Phone Number	Ext
					Country Area	Fax Number	
P Home	Email	example@exahm	nplecompany.com				
er New Application	Facility Address						
	Address Line 1	32 Garden St		Name to be Printed	Please Select		
	Address Line 2						
	(Optional) ZIP Code	07446					
	City	Ramsey					
	State	New Jersey	*				
	Inspection Details						
	Last Inspection Type			Date of Last Inspection	(MM/DD/YYYY)		
	Please Select		•			1	T.
	Copy of Last Inspectio	n Notice					
	Browse No file s	elected.				Upload	

Certain information in this section will be prepopulated depending on how the applicant chose to identify the manufacturer. All facilities will be required to enter contact information and inspection details.

Screen #4: Country Selection

FURLS CAP	e Application Process	(CAP)		
Enter New Applicati	on			₽ 0
CAP Home > Enter New Applicatio	n > Country/Product Information			
CAP Home	Business Information	Country/Product Information	Review	Signature
Enter New Application	Country Selection Country of Origin Country of Destination	UNITED STATES		
	Previous			Seve and Exit Next >

Next, applicants will be prompted to identify the country of destination for the shipment.

Screen #5: Product Information

FURLS Certificate	Application Process	CAP)		
Inter New Applicatio	n			0
CAP Home > Enter New Application	> Country/Product Information			
CAP Home	Business Information	Country/Product Information	Review	Signature
Enter New Application	Product Information			
	Certificate Type	Please Select		
	< Previous			B Save and Exit Next >

The options for product type are determined by the country selected in Screen #3. If user selects an EU country, the system will display the following product types in the dropdown.

- EU-Collagen
- EU-Gelatin
- EU-Chicken Collagen

If user selects a non-EU country, the system will display the following product types in the dropdown.

- SRM-Collagen
- SRM-Gelatin

There are separate product information screens for each of the product types mentioned above. The product information fields displayed on the screen will be determined by the product type selection.

-				
Country/Product Information				
Business Information	Country/Product Information	Review		Signature
Product Information	1			
Certificate Type	EU-Collagen			
DECEMONION TO THE ONE	TED STATES FOOD AND DRUG ADMINISTRATION			
Origin of Collagen	P 11.07.440			
For colleges derived from her	in bides and i controling intended in burger con	Country of Deschador. Sr	the United States of America to the	- F
Por collagen derived from boy Responsible Ministry: FOO	one hides and / or pigskins, intended for human con D AND DRUG ADMINISTRATION	Certifying Department: CE	The United States of America to the NTER OF FOOD SAFETY AND A	PPLIED NUTR
Identification of Collage	en			
Product Description		Type of packaging		
Guaranteed storage		Date of manufacture		
period				
Net weight in Kg		Quantity		
Animal species and p	ature of the raw material used (e.g., bouine bide	a and aking)		
Approval Number	aute of the raw material used (e.g., bovine hide			
Product Label (Ontion	nal)			
Browse No file	selected.			
Supported files include .jp	g, jpeg and pdf.			
Destination of Collager The collager will be s The collager will be s By the following mean (indicate the name or or name (ship). This inform	g, jeg and pdf. h lent from (Place of Loading) lent to (Country and Place of Destination) ss of transport mptitration number (railway wagons and Lorries), the materia bits of underder in the case of underdarg and	flight number (arcraft) or the reloading)	Piease Select	
Destination of Collager The collager will be s The collager will be s By the following mean (indicate the name or en name (ship). This inform Identification	p. jeg and pdf. heart from (Place of Loading) heart to (Country and Place of Destination) so of transport registration number (rallway wagons and Lorries), the matter is to be updated in the case of unloading and	flight number (arcraft) or the relading) Documentary references	-Please Select-	
Destination of Collager The collager will be s The collager will be s The collager will be s By the following mean (indicate the name of or name (ship) The inform Identification Date of shipment	p. Jog and pdf. p. Jog and pdf. n eent from (Place of Loading) eent to (Country and Place of Destination) ss of transport giptration number (ralway wagons and Lorries), the mateon is to be updated in the case of unloading and	Bight number (arcraft) or the reloading) Documentary references	Please Select	
Destination of Collager The collager will be s The collager will be s The collager will be s By the following mean (Indicate the name or en rome (ahle) This reform Identification Date of shipment Consignor Name	p. jeg and pdf. h h eent from (Place of Loading) sent to (Country and Place of Destination) ns of transport inplitation number (railway wagons and Lorries), the hadoon is to be updated in the case of unloading and	flight number (arcraft) or the reloading) Documentary references Consignee Name	Please Select	
Destination of Collager The collager will be s The collager will be s The collager will be s By the following mean (add atte the name of ra- find atte the name of ra- find atte the name of ra- find atte of shipment Consignor Name Country	p. jeg and pdf. h sent from (Place of Loading) sent to (Country and Place of Destination) so of transport gistration number (railway wagons and Lorries), the nation is to be updated in the case of unloading and iterat	flight number (arcraft) or the reloading) Documentary references Consignee Name Country	Piease Select	
Destination of Collager The collager will be s The collager will be s By the following mean (and cafe the name or re- free destination) Identification Date of shipment Consignor Name Country Address Line 1	p. jeg and pdf. h h ent from (Place of Loading) ent to (Country and Place of Destination) ns of transport gittation number (ralway wagons and Lorries), the nation is to be updated in the case of unloading and UNITED STATES UNITED STATES	flight number (arcraft) or the reloading) Documentary references Consignee Name Country Address Line 1	Please Select	
Destination of Collager The collager will be s The collager will be s The collager will be s By the following mean (solution) the solution (solution) the solution (solution) the solution (solution) the solution (solution) the solution Date of shipment Consignor Name Country Address Line 1 Address Line 2	p. jeg and pdf.	flight number (arcraft) or the reloading) Documentary references Consignee Name Country Address Line 1 Address Line 2	Please Select	
Destination of Collager The collagen will be s The collagen will be s The collagen will be s By the following mean Podicate the number or m Identification Date of shipment Consignor Name Country Address Line 1 Address Line 2 (Optional) ZIP or Postal Code	p. jeg and pdf.	flight number (arcraft) or the relading) Consignee Rame Country Address Line 1 Address Line 2 (Optional) ZIP or Postal Code	Please Select	
Destination of Collager The collagen will be s The collagen will be s By the following mean (indicate the name of re name (ship) This inform Identification Date of shipment Consignor Name Country Address Line 1 Address Line 1 Address Line 2 (Optional) ZIP or Postal Code	p. jeg and pdf.	flight number (arcraft) or the reteadorg) Documentary references Name Consignee Name Country Address Line 1 Address Line 2 (Optious) ZP or Postal Code	Please Select	
Destination of Collager The collagen will be s The collagen will be s The collagen will be s By the following mean Podicate the number or m Identification Date of shipment Consignor Name Country Address Line 1 Address Line 2 (Optional) ZIP or Postal Code City State/Province	p. jeg and pdf.	flight number (arcraft) or the relading) Documentary references Name Consignee Name Country Address Line 1 Address Line 2 (Optiona) ZP or Potata Code City State/Province	Please Select	

Screen #5.1: Product Information – EU Collagen

Screen 5.1 displays the product information that the European Union requires for health certificates for collagen products.

Screen #5.2: Product Information – EU Gelatin

Country Product Information Business Information Product Information Certificate Type					
Business Information Product Information Certificate Type					
Product Information			Barton		
Certificate Type	Country Product Inform	Ron	Review		Signature
Certificate Type					
	EU-Gelatin	*			
DECLARATION TO THE UNIT	TED STATES FOOD AND DRUG ADMINISTR	ATION			
Origin of Gelatin					
1000219942 32 Garden St	t, Ramsey, NJ 07446		Country of Destination: SPA	N	
For Gelatin derived from pigsk	ins or ruminanat bones, intended for human o	onsumption, i	ntended for dispatch from the	United States of America	to the European Com
Responsible Ministry: FOO	D AND DRUG ADMINISTRATION		Certifying Department: CEN	TER OF FOOD SAFETY	AND APPOED NOT
Identification of Gelatin					
Product Description			Type of packaging		
Guaranteed storage period			Date of manufacture		
Net weight in Kg			Quantity		
Number of packages					
Animal species and na	ture of the raw material used (e.g., bovine	hides and si	ins) (Optional)		
Approval Number					
Product Label (Option	sal)				
Browse No file s	La Uploa	1			
Supported files include .jpg), jpeg and pdf.				
Destination of Gelatin					
The gelatin will be ser	nt from (Place of Loading)				
The gelatin will be ser	nt to (Country and Place of Destination)				
By the following mean (indicate the name or re	is of transport gistration number (railway wagons and Lonie), the flight nu	mber (aircraft) or the	Please Select	
name (ship). This inform	nation is to be updated in the case of unloading	and reloading	2)		
Identification			references		
Date of shipment					
Consignor			Consignee		
Name			Name		
Country	UNITED STATES		Country	Please Select	
Address Line 1			Address Line 1		
Address Line 2 (Optional)			Address Line 2 (Optional)		
ZIP or Postal Code			ZIP or Postal Code		
City	Please Select	٠	City	Please Select	
State/Province	Please Select	•	State/Province	Please Select	

Screen 5.2 displays the product information that the European Union requires for health certificates for gelatin products.

er New Application						
P Home > Enter New Application > Country P	oduct information					
	Business Information	Country	Product Information	Review		Signature
Proc	luct Information					
Ce	tificate Type	SRM-Collagen				
		ED SINES FOOD NO DR	OG RUMMA TRATION			
0	rigin of Collagen	Demon NUMBER		0		
	- West Rick Materials of Re-	Hamsey, NJ 07446		Country of Destination: Arc	JENTINA	
Re	ponsible Ministry: FOOD	AND DRUG ADMINISTRATI	ON	Certifying Department: CEN	ITER OF FOOD SAFETY AN	D APPLIED NUTRITION
le	ientification of Collage	n				
	Product Description			Type of packaging		
	Guaranteed storage			Date of manufacture		
	period (Optional) Net weight in Kg			Quantity		
	Number of packages					
	Animal species and nat	ture of the raw material use	d (e.g., bovine hides and	skins) (Optional)		
	Approval Number					
	Product Label (Option	al)				
	Browse	elected	A Upload			
	Supported Res include .pg	joing and pdf				
c	estination of Collagen					
	The collagen will be se	ins from (Place of Loading)				
	The collagen will be se	ent to (Country and Place of	(Destination)			
	By the following means	of transport			-Please Select-	
	(Indicate the name or reg name (ship). This inform	pstration number (railway was ation is to be updated in the c	pons and Lorries), the flight ase of unloading and reload	number (aircraft) or the ing)		
	Identification			Documentary references		
	Date of shipment					
3	Tensioner			Paralisana		
	Name			Name		
	Country	UNITED STATES		Country	-Please Select-	
	Address Line 1			Address Line 1		
	Address Line 2 (Optional)			Address Line 2 (Optional)		
	ZIP or Postal Code			ZIP or Postal Code		
	City	Please Select	٠	City	-Please Select-	•
	State/Province	-Please Select-	•	State/Province	-Please Select-	•
N ^a Home ner New Application	tandard Attestation on Pris product does not contra • The skall, brain, eyes, to the skall, brain, eyes, to the skall, brain, eyes, to generate and solve and caprine animatic difficient Country-Spec-	Certificate an and is not derived from the mails, and spend cord of over male, and spend cord of over explored through the gurn. If Captre annuals; immail produced on or after 1 :iffic Attestation	tolowing insterials: re animals aged over 12 m or Caprine animals which - January 1998 from the verti	rdhs; if the time of staughter were ma timal column (including the sacro	re than 12 months of age or h am but not the coccygeal vert	ad one of more (brae) of bowne, ovine, o
	The following information FDA reserves the right to	will appear on the certificate. edit or remove this test	If the importing country req	ees specific language in additio	n to the attestation above, em	r this language below
Ъ	lanufacturer's Declarat	ion	on analysis in the same	and Plasse dependent of	and they dearlies they have	in and cash in the
	company letterhead, and up manufacturer's declaration	kood a signed PDF below # y	ou are requesting additiona	 rease ownload a templa i country-specific language for th 	e of this declaration <u>here</u> , co le attestation, you must includ	ey and passe it on to is that language on the
	Browse	elected.	A Upload			
	The file type allowed for the	manufacturer's declaration is pd	Fordy			

Screen #5.3: Product Information – SRM Collagen

Screen 5.3 displays the product information that will be printed on the Specified Risk Materials Certificate for collagen products.

er New Application					
Home > Enter New Application > Country/Product Information	90				
Business	Information Country	Product Information	Beview		Signature
Product Infor	mation				
Certificate Type	SRM-Gelatin				
DEGRAFION	THE UNITED STATES FOOD AND DRU	ADMINISTRATION			
Origin of Gela	tin				
1000219942 3	Clarden St, Harrisey, NJ 07446		Country of Destination: AR	GENTINA	
Specified Hisk Ma Responsible Min	enals of Bovine, Ovine, and Caprine origin istry: FOOD AND DRUG ADMINISTRATIC	COPPICAL DECLAMATION	Certifying Department: CE	NTER OF FOOD SAFETY A	ND APPLIED NUTRITION
Identification	of Gelatin				
Product De	scription		Type of packaging		
Guarantees	storage		Date of manufacture		
period (Opt	ional)		Quantity		
Number of	packages				
Animal spec	ies and nature of the raw material use	d (e.g., bovine hides and s	kins) (Optional)		
Approval N	mber				
(Optional) Product Lai	tel (Optional)				
Browse.	No file selected.	A Upload			
Supported file	s include jpg, jpeg and pdf.				
Destination of	Gelatin				
The gelatin	will be sent from (Place of Loading)				
The gelatin	will be sent to (Country and Place of D	lestination)			
By the follo	wing means of transport			-Please Select-	
(indicate the name (ship)	name or registration number (railway wag This information is to be updated in the ca	ons and Lomes), the flight n ase of unloading and reloadin	imber (aircraft) or the g)		
Identificatio	a		Documentary references		
Date of ship	Inem				
Consignor			Consignee		
Name			Name		
Country	UNTED STATES		Country	-Please Select-	•
Address	Line 1		Address Line 1		
Address (Optiona	Line 2		Address Line 2 (Optional)		
ZIP or Po	stal Code		ZIP or Postal Code		
City	-Please Select-	•	City	-Please Select-	•
StatePri	-Please Select-	•	anner Tovince	-Please Select-	•
Standard Atte	station on Certificate				
This product do	es not contain and is not derived from the	Sollowing materials			
The skull, b the skull, be	ain, eyes, tonoils, and spinal cord of bove ain, eyes, tonoils, and spinal cord of owne	e animals aged over 12 mon or Caprine animals which at	ths: the time of staughter were m	ore than 12 months of age or	had one or more
permanent • the spicers	ncisor tooth englied through the gum, of ovine and Caprine animalis;				
mechanical caprine and	y recovered meat produced an or after 1.2 nats.	amuary 1998 kipm the verteb	rar column (including the sac	rum but not the coccygeal ver	tetrae) of bowhe, overe, o
P Home					
ar New Application Additional Co	untry-Specific Attestation				
The following FDA reserver	internation will appear on the certificate. It the right to edit or remove this text.	r the importing country requir	rs specific language in addti	on to the attestation above, en	ner this language below
Manufacturer	s Declaration				
The manufactur	er must submit a legally binding declarate waif, and upload a signed PDF below it vi	in specific to this consignme to are requesting additional o	nt. Please download a temple ountry-specific language for	ale of this declaration <u>here</u> , o the attestation, you must inclu	opy and paste it on to de that language on the
manufacturer's	declaration		a build its	and a provide state	
Erowse.	No file selected	(Deland			

Screen #5.4: Product Information – SRM Gelatin

Screen 5.4 displays the product information that will be printed on the Specified Risk Materials Certificate for gelatin products Screen #5.5: Product Information – EU Chicken Collagen

r New Application					
ome > Enter New Application >	Country/Product Information				
	Business Information	Country/Product Information	Review		Signature
	Product Information				
	Castificate Tons	Fil Okidas Oslava			
	HEALTH CERTIFICATES FOR	EU-Chicken Collagen	MAN CONSUMPTION		
	Origin of Chicken Colla	240			
	1000219942 32 Garden St.	Ramsey, NJ 07446	Country of Destination: SP	AN	
	Responsible Ministry: FOOI	3 AND DRUG ADMINISTRATION	Certifying Department: CE	NTER OF FOOD SAFETY /	ND APPLIED NUTRITION
	Identification of Chicker	n Collagen			
	Product Description		Type of packaging		
	Guaranteed storage period		Date of manufacture		
	Animal species and na	ture of the raw material used (e.g., bovine hides	and skins) (Optional)		
	Approval Number				
	Product Label (Option	al)			
	Succepted line instants into	ices and off			
	Destination of Chicken	Collagen			
	The collagen will be se	ent from (Place of Loading)			
	The collagen will be se	ent to (Country and Place of Destination)			
	By the following mean (indicate the name or re	s of transport gistration number (railway wagons and Lorries), the fl	light number (aircraft) or the	-Please Select-	•
	name (ship). This inform	ation is to be updated in the case of unloading and re	sloading)		
	internation of the second		references		
	Date of shipment				
	Consignor		Consignee		
	Name		Name		
	Country	UNITED STATES	Country	-Please Select-	•
	Address Line 1		Address Line 1		
	Address Line 2 (Optional)		Address Line 2 (Optional)		
	ZIP or Postal Code		ZIP or Postal Code		
	City	-Pieate Select.	City	Please Select	•
fome	State/Province	-Please Select-	State/Province	Please Select	•
new Approxition	Standard Attestation on	Certificate			
	The product has been made	e exclusively from boyne hides aution moskers which	h have been derived from animalic -	hich have been staustered	in a slaushterhouse and
	whose carcasses have be transported directly from th	en found fit for human consumption following an ante e slaughterhouses or cutting plants to the collagen er	and post mortem inspection. The b stablishment in compliance with the	ovine hides and/or pigskins l relevant US public health st	have been either (1) andards requirements of
	the Code of Federal Regula 98/258/EC as last amender	tions, which have been recognized for this purpose a 5 by Decision//EC, or (2) transported from a tannery s	as equivalent to the European Com subject to periodic inspection by FD	munity standards as prescrib A that has been shown by s	oed in Council Decision uch inspections to
	comply with the relevant US European Community stan	5 public health standards requirements of the Code o dards as prescribed in Council Decision 98/258/EC a	If Federal Regulations, which have t as last amended by Decision/EC.	seen recognized for this purp	ose as equivalent to the
	This product does not conti- meat obtained from bones	ain and is not derived from specific risk materials as of bovine, ovine or caprine animals. The bovine animu	defined in Annex X), section A to Re als, from which this product is deriv	gulation (EC) No 999/2001 e ed. have not been slaughter	r mechanically recovered ad after sturning by
	means of gas injected into rod-shaped instrument into	the cranial cavity or killed by the same method or stan iduced into the cranial cavity.	ughtered by laceration after sturning	g of central nervous tissue b	means of an elongated
	This product has been man followed he one or more in	ufactured by a process which ensures that the raw r car. Electron and extrusion. During this represents o	material is subjected to treatment in recent time have seen could other	volving washing, pH adjustm then there is athenined for ex-	ent using acid or alkali, in huma hu the Euronean
	Manufacturate Destant	ina di secondo de la constante			
	The man factors or the	unit a lenally bodies declaration searche to the	proment Please doubload a transf	the of this decimation beau	copy and parts 3 on to
	company lefterhead, and or	youd a signed PDF below. If you are requesting addit	ional country-specific language for	the attestation, you must incl	ude that language on the
	manufacturer's declaration				
	manufacturer's declaration	elected Dipload			

Screen #5.5: Product Information – EU Chicken Collagen

Screens 5.5 and 5.4 display the product information that the European Union requires for health certificates for chicken collagen products.

Screen #5.5a: Product Inform	ation. Additional Information	- EU Chicken Collagen
	lion) maarcionar mitor matron	Le entenen conagen

FURES CAP Certificate Ap	plication Process	(CAP)							
Enter New Application								₽.)
CAP Home > Enter New Application > Count	try/Product Information								
CAP Home	Business Information	Country/	Product Information		Review		Signature]
Enter New Application	Product Information								
	Chicken Collagen Additio	nal Information							
	Entry BIP In EU (Optional) Identification of container/ Seal			Date of D (Optional) Commodi (HS Code	eparture		=		
	number (Only where applicable) Temperature of the product	Please Select	¥	(113 0008	(Optional) —				
	Commodities certified fo Human Consumption For Import or admission Into EU								
	Species/Commodities Infe	ormation							
	Species (Scientific Name)	Treatment type	Approval number of the establishment's Manufa plant	octuring	Number of packs	agea Net Weight (kg)	Action		
	Identification of Commoditi	88							
	Species (Scientific Name)			Treatmen	t type				
	Net Weight (kg)			Number o packages	۲ (
	Approval number of the	establishment's Manufac	turing plant			Clear	+ Add/Update Commod	ities	
	< Previous						Save and Exit	Next >	

Information for multiple species/commodities may be entered in the Identification of Commodities section.

Screen #6: Product List

FURLS CAP	e Application Process (CAP)					
Enter New Applicati	on					8 6
CAP Home > Enter New Application	> Country/Product Information					
CAP Home	Business Information	Country/Product Information		Review	Signature	
Enter New Application	Product List	fully added.				
	Firm Address	c	Country			
	Example Facility 2 32 Garden St, Ramsey, NJ 07446	s	SPAIN		+/	Add Product
	Show 10 v entries				Filter:	
	Certificate Type	Product Description	11	Date of Manufacture	Destination Country	Actions
	EU-Chicken Collagen	Test Product		03/06/2018	SPAIN	×
	Showing 1 to 1 of 1 entries				Previous	1 Next
	4					
	< Previous				Save and Exit	Next >

After entering all of the product information for the first product, applicants will be able to review the product list and add additional products/certificates.

Screen #7: Send Certificate Via

FURLS CAP Certificate	Application Process (0	CAP)		
Enter New Application				₽ 0
CAP Home > Enter New Application >	Country/Product Information			
CAP Home	Business Information	Country/Product Information	Review	Signature
Enter New Application	Send Certificate Via Send Certificate Via Carrier Name	Please Select▼		
	Account Number (Optional) Return Label			
	Choose File No file chosen	Upload bel are .pdf, .jpg and .jpeg.		
	Previous			임 Save and Exit Next >

Screen 7 displays the fields for selecting how the certificate(s) will be delivered and for uploading a prepaid return label.

Screen #8: Laboratory Results

FURLS CAP Certificate A	Application Process (CA	P)		
Enter New Application				₽ 0
CAP Home > Enter New Application > C	Country/Product Information			
CAP Home	Business Information	Country/Product Information	Review	Signature
Enter New Application	Laboratory Results			
	Upload Laboratory Results			
	Laboratory Name		Accreditation	
	Laboratory Result			
	Laboratory Result			
	Choose File No file chosen			Upload
	The file types allowed for the Laboratory	y Result are .doc, .docx, .jpg, .jpeg, .pdf and .tiff.		
	Additional Documents			
	Upload Additional Documents			
	Additional Documents (Optional)			
	Choose File No file chosen			Upload
	The file types allowed for the additional	documents are .jpg, .jpeg, .doc, .docx, .bt, .xls, .xlsx	, .pdf, .gif and .rtf.	
	< Previous			Save and Exit Next >

Screen 8 displays the fields for entering laboratory information, uploading laboratory results, and uploading additional documents as may be required.

Screen #9: Application Review

FURLS CAP Certificate A	pplication Proces	ss (CAP)					
Enter New Application							⊖ 6
CAP Home > Enter New Application > A	pplication Review						
	Business Information	n C	ountry/Product Information		Review	Signat	ure
	Application Review						
	Please review the information that proceed to the signature page an	t you have entered for the d submit the application.	is application. If you wish t	o make any edits, you m	nay select the "Edit" button	n next to the appropriate section	Click "Next" to
	Rusinese Information						
	Dusiness mornauori						Eat
	Parent Company Informat	ion					
	Parent Company Name	Example Facility 2		Doing B	usiness As (Optional)		
	Approval Number Address Line 1	1000219942 32 Garden St		Address	Line 2 (Optional)	-	
	State or Province	New Jersey		Country		UNITED STATES	
	Contact Information						
	First Name Last Name Email	Example Name example@exahmple	company.com	Telepho Fax (Op	ne tional)	001-240-4029539	
	Facility Address						
	Address Line 1 ZIP Code State	32 Garden St 07448 New Jersey		Address City Name to Certifica	Line 2 (Optional)	Ramsey Example Facility 2	
	Inspection Details						
	Last Inspection Type Date of Last Inspection	MM/DD/YYYY)	Federal 03/19/2018				
	copy of case inspection	File Name			Fi	le Size	
		Test2.pdf			25	237 KB	
	Country Summary						🖌 Eat
				Country			
				SPAN			
	Product Information						🖌 Eat
	Show 10 • entri	15				Filter.	
CAP Home	Certificate Type	Product	Date of	Destination	Manufacturer's	File Size	
Enter New Application	4	Description	Manufacture	Country	File Name 11	17	
	EU-Collagen	Test Product	03/19/2018	SPAN	Test 4 pdf	24.900	
	Showing 1 to 1 of 1 entries	Č.				Previous	1 Next
	Send Certificate Via						🖌 Eat
	Carrier Name Account Number Return Label	US Ma	a				
		File Name			Fi	le Size	
		Test 4 pdf			24	960 KB	
	Laboratory Results						🖌 Edt
	Upload Laboratory Resu	its			<u></u>		
	File Name				Fi	16 Size	
		Jest 3. pdf			25	.aar ND	
						_	

After entering all the information, applicants will be able to review the complete application before submission.

Screen #10: Signature Page

FURLS CAP	Application Proc	ess (CAP)				
Enter New Application	5						0 6
CAP Home > Enter New Application >	Signature						
CAP Home	Business Informs	ation	Country/Product	Information	Review		Signature
	that the information may computed and that is exempt from public secrets. I agree to hold FDA I I maintain records to substan above statement with full kno \$250,000 in fines, up to five y I Agree	ain contidential coor c disclosure. Author harmless for any in tiate said declarati wledge that submir years imprisonmen	mmercial or thancial in rization is given to FD jury caused by FDA's : on and will provide to F tting a false statement t or both. ed to provide this conser	tormation and/or 1 A sending the info sharing the inform DA upon request is in violation of U t and my full name.	rade servers, within the meanin mission without deletion of confi- tation with the countries identifie during an inspection or otherwi- nited States Code Title 18, Sect position, and address are set out I	g of 18 U.S.C. 1406, 21 U.S. dential commercial or financ d on this application. se all records supporting the ion 1001, and that penalties below for verification.	C. 331(), and 6 U.S.C. 52(6) (4), ial information and/or trade
	On behalf of (Optional) Name/ Position				Address Line 1	Aut	ofill from Manufacturer Address
	Department				ZIP or Postal Code		
	Contact Number	001 Country	Area Telephone Area Phone Num	Ext ber Ext	City	Please Select	Ŧ
	Email Address				State or Province	Please Select	۲
	< Previous						✓ Submit

Screen 10 displays the signature page that will be required for submission. Note: The signature text varies depending on the product.

Screen #11: Confirmation Page

FURES CAP	Application Process (CAP)
Enter New Application	₽ 0
CAP Home	
CAP Home Enter New Application	Confirmation Page Your application has been submitted successfully. Your application number is 2018-00065. Please contact the Office of Food Safety at <u>BulkCGExport-LM-OFS@FDA.HHS.GOV</u> if you have any questions regarding your application.
	Exit >

After submission, applicants will receive a confirmation page and an application number that can be used for future inquiries about the application.