OMB No. 0581-0125 Exp. 3/31/2023

APP	LICATION	Α		AL MA	RKETIN	IG SERVICE AND CERT	ΓIFICA	ΓE OF	:	TAKEN E	ATION BY (Initials)	DAT	E		HC	OUR	
NAME AND I	MAILING A	DDRE	ESS OF APP	LICAN	Γ (Includ	le City, State, Z	IP)	NAME	AND N	MAILING A	DDRESS OF	RECEIVER O	R BUYE	R (Include	e City, S	tate, ZIP)	
Enter your	r E-Mail Ad	dress	here:														
IF REQUESTED BY OTHER THAN APPLICANT, SPECIFY NAME OF PARTY							CONTRACT OR ORDER NUMBER DATE AVAILABLE FOR SAMPLING/INSP.										
	MAII C	EDT	FIGATE AND	\ FEE !			TE: Mark	an "X" i	in appro	priate blo	ocks	DICTRIBUTIO	NUNCT	DUCTION			
MAIL CERTIFICATE AND FEE BILL TO  APPLICANT OTHER (Specify)							DISTRIBUTION INSTRUCTIONS  □ FAX □ USPS □ OVERNIGHT □ EXPRESS GROUND MAIL □ OTHER										
NAME OF			NNED □ FR	OZEN	□ DRII	ED □ DEHYDR	RATED [	OTHER		LOCATIC	N OF PRODU	JCT (Name, Ad	dress, a	and Phone	9)		
TYPE OF CASE							CASE MARKS (Specify in "Remarks" on reverse)										
□ NONE □ DOMESTIC □ OTHER (Specify)								□ COMMERCIAL □ SPECIAL									
PRODUCT PREVIOUSLY GRADED  □ NO □ YES (If "Yes", give Certificate Number)  FIELD OFFICE WHERE GRADED																	
REPORT RESULTS IMMEDIATELY AFTER GRADING TO  □ APPLICANT □ OTHER (Specify)								QUALITY REQUIREMENTS OF RECEIVER									
ADDITION	AL REQUIR		NTS (Check	all that	apply)												
			Pack (Federa				0)	☐ "Officially Sampled" stamp on cases. Stamp this form when accomplished									
<ul> <li>□ Condition of Container Examination (Federal or State Agencies)</li> <li>Attach Form AD-748 or 741</li> <li>□ USDA Contracts—Country of Origin Certification and Traceability</li> <li>Documents. (Plant Survey and Food Defense System Survey required) or</li> </ul>						☐ Checkloading Required Date: ☐ Unofficial Sample Submitted by Applicant. See terms and signature request on reverse side of this form											
Plant S	System's A	udit								-							
Importer of		T PRODUCT INSPECTIO  Date of Arrival Port o			f Entry Name of Vess			el/Voyage No. Customs E		Entry No. Bill of Lading No.							
Broker's Reference N			FCE No. Port			of Export Harmonize			d Tariff Code		Container No.		Country of Origin				
	ORT CERT											_					
Port of Export			Port of Entry			Name of Vessel.			Voyage No.		•	Date of Freezing				Storage Temp. °0	
□ OTHE	R: PLEASE	SPE	CIFY IN REM													NO	SAMPL
LOT NO.		LOT SIZE AND DESCRIPTION			NO. AND TYPE OF CONTAINERS IN CASE				CODE MARKS IN LC						_	ES	
ADDITION	AL SAMPLE	E UNI	TS FOR:	□ ANA	ALYTICA	AL USDAI	REVIEW	□ MO	NTHLY	REVIEW	□ OTHER						
REMARKS	3:																
						ations of the Sec wn samples beli							and ve	getables p	ursuant	to the Agi	ricultural
DATE	DRIVING	_	RESS OF SA		R OR FI I/PING	ELD OFFICE CONDITION	CHECKLO	JADING.	DD	OFFIC	OTHER	R PRINT AND TOTAL		IAME RTIME	NIGH <sup>*</sup>	т	INSP
DATE	(HRS)	1	(HRS)		RS)	(HRS)	(HR			M (HRS)	(HRS)	HOURS		RTIME IRS)		(HRS)	INSP INT.
		-															

## **CERTIFICATE OF SAMPLING**

THIS IS TO CERTIFY that in compliance with the regulations of the Secretary of Agriculture governing the inspection of processed fruits and vegetables pursuant to the Agricultural Marketing Act of 1946, as amended, I have this day drawn samples believed by me to be representative of the lots described below.

CONTRACT	- NILIMBED		T DUDCHASE ODDED NUMBER							
CONTRACT			PURCHASE ORDER NUMBER							
NAME AND	MAILING ADDR	ESS OF APPLICANT (Include City, State, Zip)	NAME AND LOCATION OF WAREHOUSE (Include City and State)							
PRODUCT			SIZE AND KIND OF CONTAINERS							
TYPE OF C	ASE (if cased) □	CORRUGATED □ OTHER □ Tray Pack	NUMBER PER CASE							
CASE MAR	KINGS (if any)			1						
LOT NO.	NO. SAMPLES	CODE MAR EMBOSSED INK STAMPE	KKS D INK JET OTHER		NO. CASES	LOCATION IN WAREHOUSE				
DEMARKO										
REMARKS										
DATE	OFFIC	CIAL SAMPLER PRINT AND SIGN NAME		ADDRESS OF FIELD OFFICE/INSPECTION POINT						
The undersign	ned applies for inspe	ction of the processed food products described in this application is	n accordance with the regulations of the	ne Secretary of Ag	griculture (7 CFR). To	the best of my knowledge				
and belief, the	ese containers are no	ot from lots which have been previously inspected by the U.S. Dep LE OF REQUESTOR	partment of Agriculture and are in no v	vay the subject of	controversy with any OF REQUESTOR	government agency.				
		·· ·· · · · · · · · · · · · · ·	GIGINATURE OF REQUESTOR							

Information in this application will be used in connection with performing an inspection on the product described in this application (7CFR 52). According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is o581-0125. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.