

NOAA form 89-814 Prescribed by NOAA Inspection Manual		U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION			CONTRACT NUMBER: FEDERAL TAX ID #: XXXXXXXXXXXXXXXXXXXXXXX TODAY'S DATE:																																				
REQUEST FOR INSPECTION SERVICES																																									
NAME OF REQUESTER				SERVICING AGENT'S NAME & PHONE NUMBER																																					
STREET ADDRESS				STREET ADDRESS																																					
CITY		STATE	ZIP CODE		CITY STATE ZIP CODE																																				
CONTACT NAME	PHONE NO.	FAX NO.		TYPE INSPECTION REQUESTED <input type="checkbox"/> Lot Inspection Certificate <input type="checkbox"/> Export Health Certificate <input type="checkbox"/> Certificate of Origin <input type="checkbox"/> EU Certificate <input type="checkbox"/> Other:																																					
LOCATION OF PRODUCTS - NAME				SPECIAL INSTRUCTIONS (<i>Buyer Specifications, country requirements, etc.</i>) <input type="checkbox"/> Market Specifications: <input type="checkbox"/> Product on FDA Hold?																																					
LOCATION OF PRODUCTS - STREET ADDRESS																																									
CITY		STATE	ZIP CODE		DISPOSITION OF SAMPLES: <input type="checkbox"/> Return <input type="checkbox"/> Destroy <input type="checkbox"/> Charity																																				
ASSESS CHARGES TO:				INSPECT FOR: <input type="checkbox"/> Quality & Condition <input type="checkbox"/> Minimum U.S. Grade Attributes <input type="checkbox"/> U.S. Grade A Attributes <input type="checkbox"/> Net Weight <input type="checkbox"/> Size or Count <input type="checkbox"/> Other: Origin: _____																																					
STREET ADDRESS																																									
CITY		STATE	ZIP CODE																																						
CERTIFICATE FORWARDED TO:																																									
STREET ADDRESS																																									
CITY		STATE	ZIP CODE																																						
REMARKS																																									
<table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 15%;">LOT NUMBER</th> <th style="width: 15%;">BRAND</th> <th style="width: 25%;">PRODUCT</th> <th style="width: 25%;">NUMBER OF CARTONS/ CASES & SIZE</th> <th style="width: 20%;">TOTAL POUNDS</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>							LOT NUMBER	BRAND	PRODUCT	NUMBER OF CARTONS/ CASES & SIZE	TOTAL POUNDS																														
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NAME OF SHIPPER (<i>For export only</i>)				NAME OF CONSIGNEE (<i>For export only</i>)																																					
ADDRESS				ADDRESS																																					
PORT OF EXPORT	VESSEL OR AIRLINE		PORT OF DESTINATION																																						
APPLICANT (<i>Printed Name & Signature</i>)					DATE																																				

Information Collection Notification - NOAA Form 89-814

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