No Phytosanitary Export Certificat ANIMA F APPLICATION FOR		OMB NO. 0579-0052 INSTRUCTIONS <b>APPLICANT</b> - Forward original to Officer In Charge where inspection, treatment and certification will be given (Item 4). Complete items 1 thru 11. <b>OFFICER</b> - Complete items 12 thru 17				
<b>1.</b> NAME AND ADDRESS OF EXPORTER		3. NAME AND AL	3. NAME AND ADDRESS OF APPLICATION (or exporters agent)			
			TEL: (AC )			
2. NAME AND ADDRESS OF FOREIGN CONSIGNEE			4. PLACE WHERE ARTICLES WILL BE MADE AVAILABLE FOR INSPECTION AND/OR TREATMENT AND CERTIFICATION (Port and location)			
		DEPARTURE			EXPORT	
	7. DESCRIPTION OF A	ARTICLES TO BE CERT	THED			
a.						
QUANTITY AND NAME OF PRODUCE AND BOTANICAL NAME						
b.						
NUMBER AND DESCRIPTION OF PACKAGES						
с.						
DISTINGUISHING						
MARKS						
d.						
CERTIFIED ORIGIN						
8. DECLARED MEANS OF COM	I certify that the ori is as represented.	I certify that the origin (place where grown) of the articles listed is as represented.				
9. DECLARED POINT OF ENTI	10. SIGNATURE (	10. SIGNATURE (applicant or exporters agent) 11. DATE				
EXPORT INSPECTION DATA - (To be filled in by Plant Protection and Quarantine Officer)						
12. LOCATION OF ARTICLES	13. % OF MATERIALS E	EXAMINED	14. % OF MATERIALS INFESTED			
15. FINDINGS AND/OR TREATMENT GIVEN (Use reverse if necessary)						
16. SIGNATURE	17. DATE AND TH	17. DATE AND TIME INSPECTED				

FORM APPROVED

PPQ FORM 572 (FEB 81) Replaces PPQ FORM 572 (AUG 74) which may be used