Export Certification Services Questionnaire

| | Identification of the product to be exported (please provide as much information as possible) | |
|---|--|--|
| 1 | a. Description of the product (and commodity code, if known.) | |
| | b. Nature of the packaging | |
| | c. Number of packages | |
| | d. Weight | |
| 2 | Origin of the product | |
| | a. Country | |
| | b. Establishment (address/ approval number (if applicable)) | |
| | c. Place of dispatch (if different from 2b) | |
| 3 | Destination of the product | |
| | a. Delivery address of the product | |
| | b. Means of transport | |
| | c. Country of Destination | |
| 4 | Have you previously exported this product to the country stated in Section 3? | |
| 5 | Have you previously applied for an export health certificate from APHA? | |
| | If Yes, please provide details. | |
| 6 | Is an import permit required by the country of destination? (if you are not sure please state "Do not know") | |