Table 4

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 0583-0094. The time required to complete this information collection is estimated to average 10 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.

U.S. DEPARTMENT OF AGRICULTURE
FOOD SAFETY AND INSPECTION SERVICE
OFFICE OF FIELD OPERATIONS

IMPORT INSPECTION APPLICATION AND REPORT
(Meat, Poultry & Meat or Poultry Products)

Items 1 thru 22, 24, 25 & 26 are to be completed by the customs broker or applicant

1. *(Check appropriate box)*
☐ ORIGINAL
☐ CONTINUATION

2. HEALTH CERT. NO.

3. U.S. POINT OF ENTRY

4. NAME & ADDRESS OF CUSTOMS BROKER OR APPLICANT

6a. NAME & ADDRESS OF IMPORTER OF RECORD (IR):

5a. BROKER/APPLICANT PHONE NUMBER

5b. FACSIMILE NUMBER

6b. IR NUMBER

7. CUSTOMS ENTRY NO. (XXX - XXXXXXX - X)

8. REFERENCE NO.

9. COUNTRY OF ORIGIN

10. EXPORTING EST. NO.

11. PRODUCING EST. NO.

IN CONSIDERATION of the U.S. Director of Customs granting me/us permission to transfer the packages of foreign food product described on this form which are offered for entry into the United States, I/we agree, under bond filed with said director of Customs and subject to penalties prescribed in laws enacted by Congress and regulations issued there under by the Secretary of the Treasury, to hold the said food product intact at the location indicated below until it has been inspected and passed by a food inspector from the Food Safety and Inspection Service or has been otherwise disposed of under the supervision of a U.S. Customs Officer or a FSIS inspector.

12. NAME & ADDRESS OF FSIS IMPORT EST.

13. IMPORT EST. NO.

14. SPECIES

15. PROCESS CATEGORY

16. LOT NO.	17. DESCRIPTION OF PRODUCT	18. SHIPPING MARKS	19. PACKAGE TYPE *(check one)*			20. NO. OF UNITS	21. NO. OF UNITS PER CARTON	22. NET WEIGHT	**Completed by FSIS** 23. AIIS LOT ID NO.
			Sides	Pkgs.	Cans				

24. PRINT NAME OF CUSTOMS BROKER OR APPLICANT

25. SIGNATURE

26. DATE

TO BE COMPLETED BY FSIS

Product has been forwarded to the designated I-house:

27. SIGNATURE (FSIS Import Inspector)

28. DATE

Product has been inspected and passed:

29. SIGNATURE (FSIS Import Inspector)

30. DATE

31. REMARKS

SAMPLE