



格式10-P FORM 10-P

中华人民共和国农业部

正本 ORIGINAL

熏蒸 / 消毒证书

CAPO

FUMIGATION / DISINFECTION CERTIFICATE

MINISTRY OF AGRICULTURE OF P.R.CHINA

发货人及地址

编号 No. _____

Name & Address of Consignor _____

收货人及地址

Name & Address of Consignee _____

品名及数量

Name of Produce & Quantity Declared _____

标记号码 Mark & Number

产地

Place of Origin _____

运输工具

Means of Conveyance _____

SAMPLE

熏蒸 / 消毒处理

FUMIGATION / DISINFECTION TREATMENT

日期

Date _____

处理时间及温度

Duration & Temperature _____

处理方法

Treatment _____

药剂及浓度

Chemical & Concentration _____

附加声明

ADDITIONAL DECLARATION



Stamp

签证日期 Date of Issue _____

检疫官 Name of Authorized Officer _____

签名 Signature _____

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