

U.S. DEPARTMENT OF AGRICULTURE
 ANIMAL AND PLANT HEALTH INSPECTION SERVICE
 PLANT PROTECTION AND QUARANTINE

NOTICE OF ARRIVAL

INSTRUCTIONS: Immediately upon arrival, the permittee or his agent should prepare original and one copy of this form. Submit copies to the Plant Protection and Quarantine office having jurisdiction over the port of arrival.	1. NAME OF CARRIER
3. NAME OF PERMITEE/CONSIGNEE	2. DATE OF ARRIVAL
	4. PORT OF ARRIVAL
	5. PERMIT NO.
6. PORT OF DEPARTURE	7. CUSTOMS ENTRY NO.
8. CONSIGNOR/SHIPPER (Name and Address)	9. PRESENT LOCATION
	10. COUNTRY AND LOCALITY WHERE GROWN
	11. NAME OF PREVIOUS U.S. PORT (In Transit Only)
	12. LT. NO.(In Transit Shipments Only)

13. DESCRIPTION OF PRODUCT

MARKS, BILL OF LADING, AND/OR CONTAINER NO.	QUANTITY AND NET WEIGHT	COMMODITY
14. SIGNATURE OF IMPORTER OR BROKER	15. FULL BUSINESS ADDRESS OF IMPORTER OR BROKER	
16. DATE SIGNED	TELEPHONE NUMBER (INCLUDE AREA CODE)	

TO BE COMPLETED BY PPQ OFFICAL

17. DISPOSITION OF PRODUCT	
18. SIGNATURE AND TITLE OF PPQ OFFICAL	19. DATE SIGNED

According to the Paperwork Reduction Act of 1995, no persons are 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 0579-0049. The time required to complete this information collection is estimated to average .08 hours 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.

Instructions for completing PPQ Form 368
Notice of Arrival to import plants or plant products

Please TYPE or PRINT legibly.

1. Name of Carrier: List the name of carrier by identifying the airline with the flight number, ship name with the voyage number, truck and container number used to transport the agricultural product.
2. Date of Arrival: List the date on which the carrier arrives at the port on entry.
3. Name of Permittee/Consignee: List the name and street address of the person responsible for the importation. The applicant must be a United States resident. List the organization or company name, if applicable. A physical address of the facility or business is required. You may include a post office box address **in addition** to the street address for mailing purposes. List your daytime telephone number, including the Area Code. List your facsimile number, including the Area Code. List your email address if applicable.
4. Port of Arrival: List the port on which the carrier arrives.
5. Permit No.: List the USDA-APHIS-PPQ permit if the commodity requires a permit as a condition of entry.
6. Port of Departure: List the name of the port where the carrier originated in the country of origin.
7. Customs Entry No.: List the Customs and Border Protection entry number associated with this shipment.
8. Consignor/Shipper: List the name and street address of the person responsible for the shipping. List the organization or company name, if applicable. A physical address of the facility or business is required. You may include a post office box address **in addition** to the street address for mailing purposes. List your daytime telephone number, including the country code, facsimile number, including the Area Code. List the email address, if applicable.
9. Present Location: List the physical location where the commodity is to be inspected.
10. Country and Locality Where Grown: List Country, Province, State and Location where the commodities were grown.
11. Name of Previous U.S. Port: List If the commodity transited in any country prior to arrival to U.S. port.
12. I.T. No. (In transit shipment only): list the in-bond IT number this shipment is moving under.
13. Description of Product: List the following information in the space provided: Marks, Bill of Lading No., and/or Container No.; Quantity and Net Weight; and the Commodity arriving under this notice of arrival.
14. Signature of Importer or Broker: The person that is responsible for the accuracy of the responses submitted on this form.
15. Full Business Address of Importer or Broker: List the full business address and telephone number of the person whose signatory appears in Block 14.
16. Date Signed: List the date the form is completed and signed, using this format: dd/mm/yyyy.

If attachments are necessary, type or print "PPQ Form 368" along with the Company Name and address of the Importer or Broker, at the top of each page.

Send the completed original signed form to the [CBP Agriculture office](#) or [PPQ port office](#) where the shipment is arriving and making official entry. In the case of IT shipments, send the form to the port of arrival and port of entry.

For assistance with filling out this form, contact:
USDA-APHIS-PPQ-QPAS-Agriculture Quarantine Inspection
4700 River Road, Unit # 60
Riverdale, MD 20737
Phone number (301) 734-8295; ask for a staff officer.