

Fax: OUR REF.: 4/2/2016

TO: NRCS

ATT: LOUISE

TEL NO.: (CPT)

021-526 3415

FAX NO.: (CPT)

021-526 3451

TEL NO.: (PTA)

021 428 - 6464

FAX NO.: (PTA)

012 428 - 6466

FROM:

Company Name:

Tel. No.: (CPT)

Contact Person:

Fax No.: (CPT)

REQUEST FOR EXPORT CERTIFICATION

(Please supply the following information in full and legible detail.)

Language in which the certificate is required:

Permit No:

A. PRODUCT DETAILS:

Vessel:

Temp. during transport:

State or Type of Product:

Number of cartons:

Type of Packaging:

Date of Pack. / Processing:

Nett Mass:

KG

4/2/2016

B. ORIGIN OF FISHERY PRODUCTS:

Name of Processor:

ID Code:

Address of Processor:

Contact Person:

Contact Number:

C. DESTINATION OF FACTORY PRODUCTS:

Country:

Name of Consignee:

Ctiy:

Address of Consignee:

Fax

Tel

Name of Consignor:

Contact Person:

Address of Consignee:

Contact Number:

D. FLIGHT/VESSEL DETAILS:

Airport/Port of Loading: CPT International Airport

Airline / Vessel:

Flight/Voyage No.:

Airport / Port of Discharge:

Estimated Time & Date:

Arrival Time:

Departure Time:

Date:

4/3/2016

Date:

4/2/2016

Waybill No.:

Container No.:

Serial No.:

E. DETAILS OF AGENT:

Company:

Contact Persons:

Address:

F. COSTS: ACC NO.

Company Responsible:

Contact Person:

Address:

Contact Number: