

CERTIFICATE FOR IMPORTATION OF MEAT AND POULTRY INTO SINGAPORE

IDENTIFICATION

PRODUCT AS LABELED		SHIPPING MARKS
EST./PLANT NO. ON PRODUCT	MARKED WEIGHT OF LOT <u>1</u> /	NUMBER OF CARTONS <u>1</u> /
TOTAL MARKED WEIGHT		
EXPORTED BY: <i>(Applicants name and address, including zip code)</i>		DESTINATION: <i>(Name and address of Consignee)</i>
DATE OF MANUFACTURE <i>(day-month-year) (Complete for processed product only)</i>		DATE OF SLAUGHTER <i>(day-month-year) (Complete for fresh / frozen product only)</i>

CERTIFICATION

THE UNDERSIGNED CERTIFIES HEREWITH:

- The United States was free of foot-and-mouth disease and rinderpest for 6 months immediately prior to the date of export.
- The products are fit for human consumption and every precaution has been taken to prevent contamination prior to export.
- The United States has been free of swine vesicular disease and Classical Swine Fever during the last 6 months. (This requirement applies only to pork and pork products.)
- The pork was treated to destroy trichinae by one of the methods described in Section 318.10 of USDA Regulations (This requirement applies to pork meat and pork tongues. It should be deleted for pork byproducts and meat of other species.)
- The poultry and/or poultry products are free from evidence of Newcastle Disease and fowl cholera. (This requirement applies only to poultry and poultry products.)
- The canned products have been manufactured and inspected in accordance with Section 318.300 through 318.311 of USDA Regulations. (This requirement applies only to canned products.)
- The meat was not treated with chemical substances or preservatives that are injurious to health.
- The meat was derived from animals which were slaughtered, processed, packed and stored under sanitary conditions under official veterinary supervision in federally inspected establishments. The Director-General, Agri-Food and Veterinary Services recognize all federally inspected establishments as eligible to export to Singapore.

OFFICIAL SEAL



GIVEN *(City, State)*

DATE *(Name of Month, Day, Year)*

SIGNATURE OF MPI VETERINARIAN *(Indicate DVM, etc.)*

TYPE NAME OF MPI VETERINARIAN AND CIRCUIT NUMBER

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