

**Ministry of Agriculture and Forests
Bhutan Agriculture and Food Regulatory Authority**



INSPECTION SERVICES

APPLICATION FOR PHYTOSANITARY CERTIFICATE

The Officer In - Charge
Bhutan Agriculture and Food Regulatory Authority,
Ministry of Agriculture and Forests,
_____ Dzongkhag

I/We, the exporter/authorized agent of the exporter, herewith submit an application for issuance of a Phytosanitary Certificate as described below:

1. Name & Address of Exporter *					
2. Trade License No.			CID NO.		
5. Name & Address of consignee*					
Sl.No.	6. Botanical Name of Commodity*	7. Common Name of Commodity*	8. Description of Commodity	9. Quantity	10. Unit
					Gross Wt
					Net Wt
11. Importing country *				12. Declared point of entry*	
13. Number & Description of Packages*				14. Distinguishing Marks	
15. Purpose/End use*		<input type="checkbox"/> Propagation <input type="checkbox"/> Wood <input type="checkbox"/> Industrial Products <input type="checkbox"/> Consumption <input type="checkbox"/> Dunnage (Wooden packing material) <input type="checkbox"/> Laboratory specimens, Micro organisms, Micro biological, Biocontrol agents			
16. Mode of conveyance*		<input type="checkbox"/> Sea <input type="checkbox"/> Air <input type="checkbox"/> Road <input type="checkbox"/> Rail <input type="checkbox"/> Passenger		17. Conveyance Name	
18. Departure Date*				19. Date & Place of Inspection Desired*	
20. Additional Declaration (required by importing country)					
21. Pre-application treatment details		Please turn over			

Declaration

1. I/We the exporter/authorized agent of the exporter declare that the information furnished in this form, to the best of our knowledge and belief, is true, correct and complete in every respect

<i>Doc. No: BAFRA-IS-FM-52</i>	<i>Prepared by: Focal</i>	<i>Approved by: Division Head</i>	<i>Page 1 of 2</i>
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2. I/We shall carry out the instructions given by the Plant Quarantine Officials of the BAFRA in connection with inspection/fumigation/treatment of the consignment for issuance of Phytosanitary Certificate
3. I/We shall provide any relevant information and related documents connected with export of consignment for issuance of Phytosanitary Certificate

Note: * Must be filled

21. Pre-Application Treatment details			
<input type="checkbox"/> Chemical <input type="checkbox"/> Irradiation <input type="checkbox"/> Hot water <input type="checkbox"/> Dry heat <input type="checkbox"/> Vapour heat <input type="checkbox"/> Cold treatment			
Chemical Name		Treatment	<input type="checkbox"/> Fumigation <input type="checkbox"/> Spray <input type="checkbox"/> Seed treatment <input type="checkbox"/> Other(Specify):
Concentration		Duration & Temperature	
Treated by			
Treatment supervised by			
Additional Information			

Date: Place:	Seal	Name & signature: Designation:
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