



Request for طلب

إصدار شهادة بيع محلي "Certificate For Domestic Market"

To be filled by EGYCERT.	تملاً عن طريق إيجي سيرت
Request Received on:	
Certificate No.:	Issued on :
ID Inspection : <input type="checkbox"/> Yes <input type="checkbox"/> No	

	Mandatory Information	Data																																
1.	Operator name:																																	
2.	Address of the operator:																																	
3.	Buyer name:																																	
4.	Address of the buyer:																																	
5.	Name of Control Body/Control Authority of the Buyer:																																	
6.	Address of the Control Body:																																	
7.	Code of the Control Body:																																	
8.	Mean of transportation:	<input type="checkbox"/> Ship: Name of the ship: <input type="checkbox"/> Airplane: Flight No.: <input type="checkbox"/> Truck: Plate No.:																																
9.	Number of the invoice:																																	
10.	Date of the invoice:																																	
11.	Description of products:																																	
	<table border="1"><thead><tr><th>CN code</th><th>Product Name</th><th>Producer Name</th><th>Organic Status</th><th>Number of packages</th><th>Type of Packages</th><th>Lot number</th><th>Net weight (kg)</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>	CN code	Product Name	Producer Name	Organic Status	Number of packages	Type of Packages	Lot number	Net weight (kg)																									
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12.	Attached Documents: (mandatory)	<input type="checkbox"/> Farm Bill <input type="checkbox"/> Mass Balance <input type="checkbox"/> Buyer Certificate <input type="checkbox"/> Operator Certificate																																



Declaration:

I hereby declare that all information given in this application is true, accurate and can be verified at any time. I also declare that I will provide any further information required for the issuance of the Certificate of Inspection, if requested so by **EGYCERT** and/or the Competent Authorities of the Member States in the European Union. I accept the corresponding fees charged by **EGYCERT** for the issuance of the Certificate of Inspection.

DATE

SIGNATURE and STAMP of the Applicant

N.B.:

The present form, shall be submitted signed and stamped by the applicant to **EGYCERT** in electronic format (*either MS WORD or PDF document – NOT Hand Written*). All accompanying documents, shall also be submitted together with the present application for document check from the side of **EGYCERT**.