

APPLICATION FOR EXPORT CERTIFICATION SERVICES –Please send completed forms to plant.health@forestrycommission.gov.uk1. **Name of Exporter:** **(The individual or company that will be shown as the consignor (sender) on the printed and authorised phytosanitary certificate)**2. **Address of Exporter:** **(should be located in exporting country)**Postcode: Tel No: Email: 3. **Address where goods will be available for inspection:** **(if different from section 2).****4. Services required****I** / **We*** require export phytosanitary certificate(s)/reforwarding phytosanitary certificates(s) for the goods detailed below.**I** / **We*** understand that the goods may have to be inspected by a Forestry Commission Plant Health Inspector before a certificate is issued. **(*Note as appropriate)****5. Details of consignment(s)**a. Name of Consignee **(end user)**

b. Address of consignee

c. Port of Import: d. Port of Export: e. Date of Export:
(dd/mm/yy)

f. Description of products:

g. Botanical/Scientific name **(if known):** h. Where timber was grown. **(Give details if in Great Britain. State country if overseas.)**i. Serial Number of phytosanitary certificate issued in country of origin:
(if applicable)

j. Quantity: **(Volume [m³] or Weight [Kg])**

k. Distinguishing marks (if any) including Unique Wood Packaging Registration No(s):*

l. Means of conveyance: **Sea freight** **Air freight** **Other**

6. **Special Conditions** (including disinfestation and/or disinfection treatment)

a. Treatment:

d. Concentration:

b. Chemical: **(if any)**

e. Date of treatment:

c. Duration and temperature:

Additional Information:

7. **Declaration:**

I confirm that to the best of my knowledge and belief the information I have given is true and I accept responsibility for ensuring that the appropriate payment for the services provided is made to the Forestry Commission. I understand that it is an offence to provide false information.

8. **Delivery addresses, Purchase Order and Credit Customer Details (UK address only)**

a. Certificate

(F.A.O): **(Contact Name)**

(Address):

b. Customer Purchase Order No: **(Own reference)**

c. Credit Customer No: **(Please quote after receipt of your first invoice from the FC)**

N.B. Phytosanitary Certificates cannot be issued more than 14 days prior to date of export.

Certificates cannot be issued after the goods have left the country.

A minimum of **five** working days' notice (for sea freight) are required to consider an application, prepare a certificate and also to arrange an inspection (inspections carried out on a random basis). We prioritise applications by date of export.

* Wood Packaging Code comprises 2 digit country code, a producer code and treatment indicator.

Name of Applicant: **(BLOCK CAPITALS)**

Signature of Applicant: Date:

Applicant Company Name: