

## agriculture, forestry & fisheries

Department: Agriculture, Forestry and Fisheries **REPUBLIC OF SOUTH AFRICA**  **Directorate: Inspection Services** 

Office:	
Tel.:	Fax:

E-mail:	 

## Application for the issuing of a phytosanitary certificate—RE-EXPORT

commence. It may be handed to an inspector or p	rectorate: Inspection Services before the inspection on the consignment will osted/faxed/e-mailed to: The Director, Directorate: Inspection Services with ly valid for <u>14 days</u> . Please collect documents within <u>3 days</u> of applying.
I (full names and surname)	of (company name)
	ARY CERTIFICATE in respect of the consignment, the particulars of
•	E-mail
	Code
Contact person Accounts: Name, surname and tel. no	
Date of applying	Signature of person applying for phyto
Please indicate firm that will be liable for the: Inspection fees	
Person collecting phyto (name)	Company Cell
PARTICULAR	S OF CONSIGNMENT
Name and address of exporter	
Declared name and address of consignee	
Number and description of packages	
Place of origin	Point of entry
Means of conveyance (mark with an X) Air Mail	Passenger Rail Road Sea
This is to certify that the plants or plant products described abo	ve were imported into
from Please mark the appropriate boxes with an X:	covered by phytosanitary certificate no.
	ned to this certificate; that they are packed repacked
	original phytosanitary certificate an additional inspection
REPUBLIC OF SOUTH AFRICA the consignment has not bee	ry regulations of this importing country, and that during storage in the en subject to the risk of infestation or infection.
DISINFESTATION AND/C	DR DISINFECTION TREATMENT
Date of treatment	ζ <b>θ</b> ,
Concentration of dosage	•
ADDITION	AL DECLARATION
	or official import requirements of the importing country.
	OFFICIAL USE
	id surname)
Inspection and travelling time Receipt no.	· ·