

APPLICATION for an EXPORT CERTIFICATE

Nebraska Department of Agriculture, Bureau of Plant Industry, Entomology Division, P.O. Box 94756, Lincoln, Nebraska 68509-4756
Telephone (402) 471-2394 Fax (402) 471-6892

NOTE: Incorrect or incomplete applications will be returned. Computer-generated applications are acceptable with prior approval by this department. We prefer to receive this document by fax. **Please print or type.** Do not abbreviate anything. Do not predate or post date. Original and pink copies will be sent to only one address.

1. Applicant name, address, and phone:	2. Mail completed phytosanitary certificate to (if other than applicant):
---	--

3. Location of articles for inspection:	4. Do you wish to have express mail service? " Yes " No Express mail company name: Account number:
--	---

5. Country exported to:	6. Date of application:
--------------------------------	--------------------------------

7. Exporter name and address (your name or your broker's name - no foreign name or address):	8. Consignee name and address (cannot be a U.S. address):
---	--

9. Name of produce and quantity declared (give total amount, whether pounds, kilograms, or individual):	10. Botanical name of plants:
--	--------------------------------------

11. Number and description of packages (include number of bags (e.g., poly, paper, burlap), railcars, containers, packets, boxes, etc.):

12. Distinguishing marks (indicate one of the following: container number(s), railcar number(s), truck or trailer license number(s), or marks on the bag(s), container(s), etc.): **NOTE:** If there are more than 6 in number, type the identifying factors on an attached sheet and state below "SEE ATTACHED."

13. Place of origin (indicate city and state):	14. Means of conveyance (indicate one of the following: air, rail, ship, truck, or any combination):
---	---

15. Point of entry (city or town where the shipment will cross the border of the country exported to; this is not the point where it leaves the United States):	16. Import permit number (if required):
--	--

Note: If you are exporting seed for propagation, please indicate the year grown, the field(s) harvested from (number or name), the variety name(s), the lot number(s), and if lab testing was done (we need a copy of the results) on an attached sheet.

Sign _____ **Date** _____

Phytosanitary certificates are printed every working day. Applications received before 12:00 noon CST are printed and sent via first class mail that afternoon. Applications received after 12:00 noon CST will be printed and sent the following day. We DO NOT guarantee same-day service. We will not fax copies of the completed phytosanitary certificate.