Sampling & stuffing intimation

11

Sampling Date & Time

DETAILS OF PROPOSED EXPORT OF CHILLI& PRODUCTS CONTAINING CHILLI& TURMERIC POWDER(CIRCULAR NO.MD/CHI/01/03 DT:09.10.2003)

NOTIFICATION NO..... Date:.... Name&Address of Exporter (with Phone&Fax No) Registration No. Name & Address of the processor, if different from the exporter Tel.No.....Fax No..... Details of products(s) notified Please attach additional sheets if required 4 Product(s) Quantity(MT) Value(FOB)Rs/Kg **Test Required** 5 **Charges** Reduced rate Full rate (5MT & above)(Rs) (below 5 MT)(Rs) 551.00 1654.00 Aflatoxin 827.00 2206.00 Sudan 827.00 Parared 827.00 3 463.00 463.00 4 | Salmonella Yeast & Mould(Microbiological) 243.00 243.00 6 Capsaicin 386.00 386.00 Others if any Payment Details: 6 Cheque No. & Date Amount Address of the place where sampling/stuffing is to be done Packing Description/Lot 8 No.&Shipping Marks Invoice No./Date &Port of 9 Shipment Port & Country of Discharge 10

12	Date of Stuffing & Time/ Sample Code number :	
13	Clearing Agent's Name, Address & Tel.No.	
	1010.	
	Signature: Representative of Sampling Agency	