



Government of Kiribati
MINISTRY OF FISHERIES AND MARINE RESOURCES DEVELOPMENT
P.O.Box 64 MFMRD, Bairiki, Tarawa, Republic of Kiribati. Ph: (686) 21099 Fax (686) 21120

COMPETENT AUTHORITY

HEALTH CERTIFICATE EXPORT INFORMATION FORM

Destination of Export (please tick):

European Union

Non-European Union

I.1. Consignor Name: Address: Tel No.: Fax No: Email:		I.5. Consignee Name: Address: Tel No.: FAX No.:	
I.7. Country of origin: ISO Code:	I.8. Region of origin: Code:	I.9. Country of destination:	ISO Code I.10.
I.11. Place of origin Name: Approval number: Address:		I.12.	
I.13. Place of loading:		I.14. Date of departure:	
I.15. Means of transport Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Railway wagon <input type="checkbox"/> Road vehicle <input type="checkbox"/> Other <input type="checkbox"/> Documentation references: Invoice No.: Order No.: Vessel: Voyage No.:		I.16. Entry BIP in EU: I.17.	
I.18. Description of commodity:		I.19. Commodity code (HS code) :	
		I.20. Quantity:	
I.21. Temperature of product Ambient <input type="checkbox"/> Chilled <input type="checkbox"/> Frozen <input type="checkbox"/>		I.22. Number of packages:	
I.23. Identification of container and seal number:		I.24. Type of packaging: Product Packaging: Box Packaging:	



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I.25. Commodities certified for: Human consumption <input type="checkbox"/>	I.26 Production Lot code(s):				
I.27.	I.28. For import or admission into (name country): UNITED STATES OF AMERICA <input type="checkbox"/>				
I.29. Identification of the commodities					