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| **FEDERAL REPUBLIC OF SOMALIA****MINISTRY OF AGRICULTURE AND IRRIGATION**  |

**Somali Agricultural Regulatory Inspection Services**

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| **APPLICATION FORM FOR INSPECTION ON PRODUCE** |

**TO:**

**The Managing Director**

**Somali Agricultural Regulatory Inspection Services**

I/We hereby apply to be provided an inspection service for our produce for phytosanitary certificate

**COMPANY INFORMATION**
Name……………………………………………………………………………………………………..

Address…………………………………………………………………………………………………..

E-Mail address…………………………………………………………………………………………..

Telephone Number………………………………………………………………………………………

Company contact person………………………………………………………………………………..

Company registration no. at ministry of commerce…………………………………………………….

Location of warehouse………………………….…..………………...…………….

Preferred date of warehouse/for inspection………………………………………………………

Type of produce**:**  FreshDry **,** Crop…….........number of packages…….....................

**DECLARATION**

In signing this application, I/we also declare that I/we are conversant with and shall observe the various clauses and conditions of the phytosanitary regulations of the country

**Date** ............................... **Signature** ..............................

**FOR OFFICIAL USE ONLY**