

APPLICATION FOR IMPORT CERTIFICATE

Name of import company .....

Address ..... Telephone .....

Email ..... Physical location .....

Contact person .....

Import license Number .....

Import date and time .....

Point of entry .....Type of vessel and number

Type of product: Fresh produce processed product (Tick as appropriate)

Produce Type (Hs Code)	Quantity (Kilograms)	Country of origin	Value (F.O.B) KES

FOR OFFICIAL USE

Checked by:

Name of officer ..... Signature..... Date .....

Approved by:

Director General..... Signature ..... Date .....

Official rubber stamp