

 <p>BUREAU OF FISHERIES AND AQUATIC RESOURCES FISHERIES INSPECTION AND QUARANTINE DIVISION Fisheries Bldg. Complex, BPI Compound, Brgy. Vasra, Visayas Ave., Quezon City</p>	Document Type: Supporting Document	
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	Document Title: Application Form for Health Certificate for Transboundary Movement of Live Fish and Fishery/Aquatic Products	

CONSIGNOR	
Name of Shipper	
Address	
Name of Company/Facility	
Address	
Telephone Number	
Registration Number	

COMMODITY	
Description of Commodity	
Scientific Name	
Quantity (no. of pieces/kgs)	
Location of Source	
Wild caught / Culture	
Registration Number	

CONSIGNEE	
Name of Consignee	
Address	
Registration Number	
Telephone Number	

SHIPMENT DETAILS	
Place of Loading	
Address	
Date of Departure	
Means of Transport	
Port of Destination	

LABORATORY
Sample Code:

ATTACHED DOCUMENTS:
<ul style="list-style-type: none"> • Laboratory • Application Form

ASSESSED BY: _____ DATE: _____ TIME: _____ RELEASED BY: _____ DATE: _____ TIME: _____
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