

ISSUED: 17.03.2023

REQUEST FOR CERTIFICATE OF CONFORMITY*

*Request for Technical Inspection Report

*Request for Certification of Inspection

IMPORTANT: The quality and completeness of the documentation submitted by the Applicant directly influences the time and cost of processing the Certification request. Incomplete applications will not be processed.

TYPE OF APPLICATION	Single Shipment	Multiple Shipment** If Multiple, specify validity,	Valid from	Valid to
**Multiple Shipments is only VALID for regular exporters having frequent shipments of the same products. This RFC can be used for multiple shipments of the same products within the validity period indicated. Validity period shall not exceed one year in all cases.				
SHIPMENT CERTIFICATION REQUEST FOR (Country name)	APPLICANT TYPE			
	Authorized Dealer	Authorized Distributor	Manufacturer	Trader
	Third-Party Logistics	Other (please specify)		

EXPORTER			IMPORTER		
Company Name					
Company Address					
Contact Person					
E-Mail					
Contact No. (Mobile/Telephone)					
Proforma Invoice No./Date			TIN		
Port of Loading			Port of Discharge		

INSPECTION LOCATION					PAYER (party responsible for paying the certification service)			
Company Name								
Company Address								
Contact Person								
E-Mail								
Contact No. (Mobile/Telephone)								
Importer and Product Registration with the Government?		Yes	No	If Yes, please specify				
Exporter/Importer Registration with the Government?		Yes	No	If Yes, please specify				
If eligible, would you like to have your inspections conducted with Inview? (Recommended)						Yes	No	
Applicant may note that, based on the approval from the specific programme Government Authority, we have the technology to perform remote inspection/audits using Inview which is Intertek’s remote audit/inspection solution which can provide you with quicker access to Intertek’s team of qualified technical audit/inspection experts and faster audit/inspection turnaround time. Inview delivers high quality inspections that meet Intertek’s Total Quality Assurance standard, all while promoting public health and well-being. For more information, please visit www.intertek.com/government/inview/ .								
Mode of Transport	Air	Rail	Road	Sea	Other (please specify)		Gross Weight	
Mode of Shipment	Bulk	FCL	LCL	Truck	Other (please specify)		Goods Condition	New Used
Goods Available Date					Container Type		No. of Container	

DECLARATION (Mandatory to be completed by the Client)

By submitting this Application

I/We hereby confirm that the information provided herein for the purpose of obtaining the Shipment Certification document is accurate and complete in all respects to the best of my/our knowledge.

I/We have read and fully comprehend the Intertek's Terms and Conditions for Government and Trade Services (GTS) which is available at www.intertek.com/terms and hereby confirm my/our acceptance of these Terms and Conditions for obtaining the Shipment Certification document.

Name		Position	
*Signature		Date	

*Signatures of Authorized Representatives can be affixed by Physical signature (Handwritten) or Digital signature or Electronic signature. Company stamp is optional.

Thank you for taking the time to fill out this form. We appreciate your business.

Please visit our website www.intertek.com/government to learn about the shipment certification services for other countries.