

Annex B-1 / AUTHORIZATION

A. NAME OF COMPANY:		
	Product Exported:	Request to return:
Description:		
Weight: (lbs/kg)		
# of packaged unit		
Date of export	From Est. #	CFIA 1454 #
Type of packaging:	Type of tamper evident means:	
Reasons for refusal:		
Shipment will return to Canada by: truck <input type="radio"/> air <input type="radio"/> ship <input type="radio"/> Other <input type="radio"/> Point of landing: _____ Date: _____		
Shipment will be presented for inspection in Canadian Registered facility. Est. Number: _____ Name: _____		
RESERVED FOR CFIA USE ONLY		
B. Product may be returned to Canada under following conditions:		
1. Only intact, sealed, clean, undamaged shipping containers are permitted to be returned to Canada.		
2. Shipment must be accompany with completed original " OFFICIAL DECLARATION FOR EXPORTED CANADIAN MEAT PRODUCTS RETURNED TO CANADA."		
3. An Animal Health import permit is required. Contact CFIA [Ottawa] (613) 225-2342 ext. 4613		
4. Shipment must be presented for inspection by CFIA in a facility for inspection at:	Est. Number: Name:	
5. Permission to return the above identified product is refused.		
Conditions applicable for this shipment:	1	2
	3	4
	5	
Permission granted/refused by : AHD	Date:	
FAOD	Date:	

Distribution.

ANNEX B-2

OFFICIAL DECLARATION FOR EXPORTED CANADIAN MEAT PRODUCTS RETURNED TO CANADA

Part 1.

Shipment covered by CFIA 1454 _____ has been refused at point of landing **or** inland¹
Number

by _____ for the reason _____, based on the
 _____ inspection of _____ units.
Type of inspection (visual, microbiological etc.) Number

Since arrival the product has always been kept under the official control
 of _____ in _____.
Competent Authority (Agriculture/Customs) Facility Name and Address

Done at : Date:.....

Name and signature of official:..... Stamp.

Part 2.

Refused product in original, intact packaged units _____ has been loaded, under our supervision,
Number

into a clean container _____ and secured by _____ seal _____
Number Competent Authority Number

for return to Canada.

Done at : Date:.....

Name and signature of official:..... Stamp.

Part 3. (Reserved for CFIA use only)

¹ Delete not applicable

**ANNEX B 3
FLOW CHART OF APPLICATION TO RETURN A SHIPMENT EXPORTED FROM CANADA**

