

TEL: (679) 3312512/3312511 FAX (679) 3305043 WEB SITE: www.baf.com.fj

## **APPLICATION FOR EXPORT LICENCE- new applications**

### FRUIT EXPORT AND MARKETING ACT (CHAPTER 154, SECTION 7)

1. BUSINES	S NAME :					
2. COMPAN	COMPANY REGISTRATION NUMBER:					
3. CONTACT	Г:					
i) Postal A	Address					
ii)Telepho						
iv) Fax No	l l					
v) Email A						
5. COMPAN	IY OWNERSHIP- please fill in t	able below				
Names of Busines Partners	Nationality of partners	Address of partners	Telephone Contact			
	•	•	·			

#### 6. **EXPORT DETAILS**-

	ommodities for Export	Importing Country	<b>Estimate Quantity Per Mont</b>
t	f you are exporting co he table below also	mmodities under Bilateral Quara	ntine Agreements please fil
c)			011
<b>BQA Commodities</b>		Areas where produce currently	Other possible areas
		planted	
7. PACI	KING FACILITY		
7. PACI	KING FACILITY		
7. PACI	<b>KING FACILITY</b> Do you own a pack	ing facility? Yes No	
	Do you own a pack	ing facility? Yes No noting photographs of the packing fac	ility. If No, proceed to (iv)
i)	Do you own a pack If yes, please attach	-	ility. If No, proceed to (iv)
<b>i)</b> ii)	Do you own a pack If yes, please attach	photographs of the packing fac	ility. If No, proceed to (iv)
<b>i)</b> ii)	Do you own a pack If yes, please attach	photographs of the packing fac	ility. If No, proceed to (iv)
<b>i)</b> ii)	Do you own a pack If yes, please attach	photographs of the packing fac	ility. If No, proceed to (iv)
<b>i)</b> ii)	Do you own a pack If yes, please attach	photographs of the packing fac	ility. If No, proceed to (iv)
<b>i)</b> ii)	Do you own a pack If yes, please attack List all the facilities	n photographs of the packing fac available in the packing facility.	
i) ii) iii)	Do you own a pack If yes, please attach List all the facilities  Where will your con	photographs of the packing fac	for export?( Please provide

#### 8. DECLARATION BY APPLICANT:

I certify that all the information given in this application is correct to the best of my knowledge.

(It is an offence under the Biosecurity Promulgation 2008; Part 12, Section 92 to make false or misleading declaration)

Full Name of Applicant:		
Designation:		
Address:		
Dated at	this	day
of20		
Signature of Applicant:		
Company Stamp:		

FOR OFFICIAL USE ONLY

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A. BIOSECURITY LICENSING OFFICER- Verification/Recommendation