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OMB Approved
0579-0256

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**EXPORT CERTIFICATE FOR
ANIMAL PRODUCTS**

Port:

FOR OFFICIAL USE ONLY

Date:

Certificate Number:

This certificate is for veterinary purposes only. It is valid for 30 days after the date of signature (*in the case of transport by ship or rail, the time is prolonged by the time of the voyage*).

This is to certify that rinderpest, foot-and-mouth disease, classical swine fever, swine vesicular disease, African swine fever, and contagious bovine pleuropneumonia do not exist in the United States of America.

ADDITIONAL DECLARATIONS

SIGNATURE OF ENDORSING OFFICIAL:

TYPED NAME:

TITLE OF ENDORSING OFFICIAL:

DESCRIPTION OF THE CONSIGNMENT

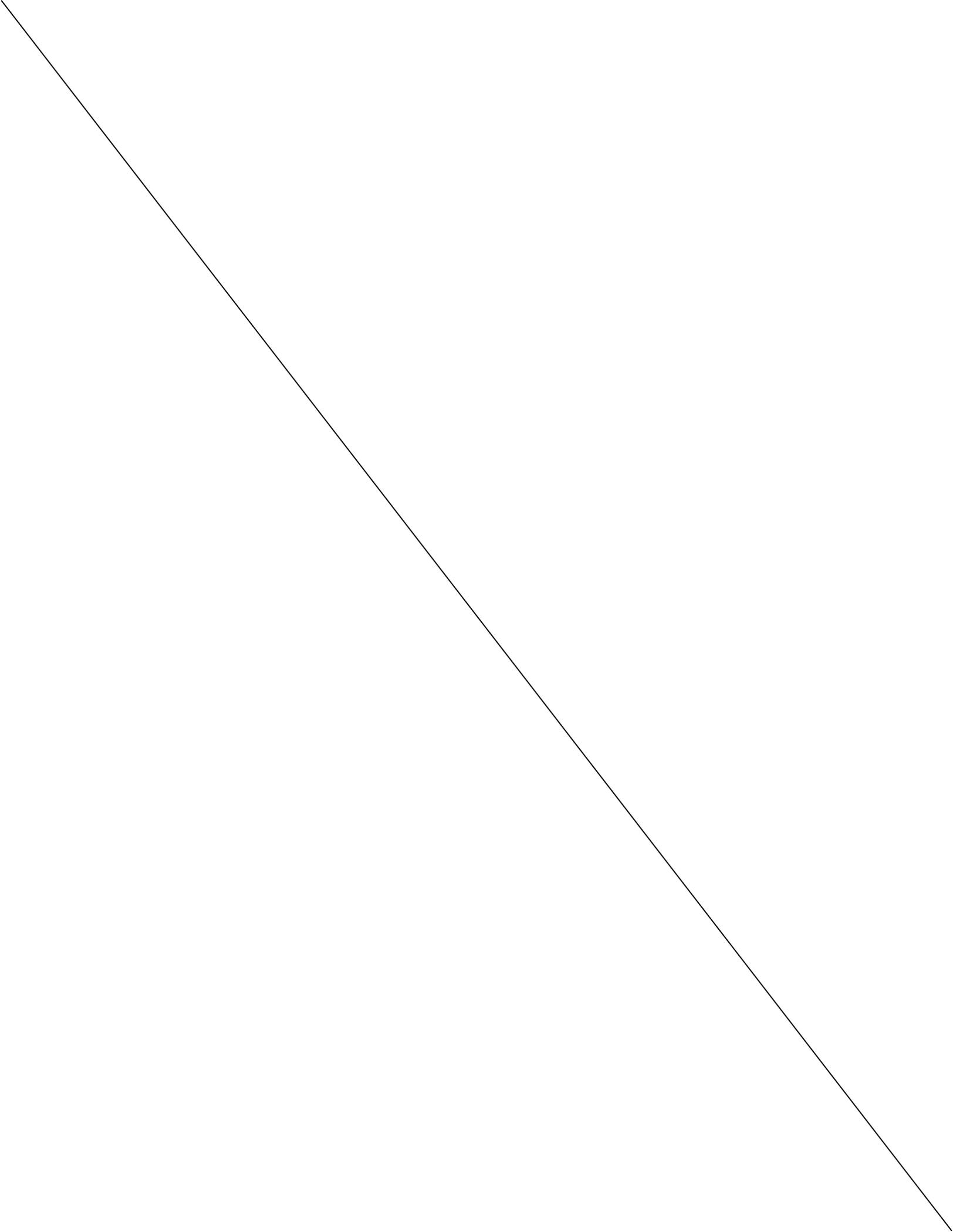
NAME AND ADDRESS OF EXPORTER:

NAME AND ADDRESS OF CONSIGNEE:

PRODUCT (*type of product, quantity, unit of measure, and animal product species of origin*):

IDENTIFICATION:

CONVEYANCE:



U.S. DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
LIVESTOCK, POULTRY, AND SEED PROGRAM

USDA PROCESSED EGG AND EGG PRODUCTS EXPORT CERTIFICATE

NAME AND ADDRESS OF CONSIGNOR/EXPORTER:	CERTIFICATE NUMBER: WEC0001	
	COMPETENT AUTHORITY: AMS	
NAME AND ADDRESS OF CONSIGNEE/IMPORTER:		
STATE OF ORIGIN:		
COUNTRY OF DESTINATION:		
PLACE OF LOADING:		
MEANS OF TRANSPORT:	DECLARED POINT OF ENTRY:	
CONDITIONS OF TRANSPORT/STORAGE:		
PRODUCER/MANUFACTURER:	DATE OF PACKING:	TYPE OF PACKING:
NAME OF PRODUCTS:	NUMBER OF PACKAGES:	NET WEIGHT:
ATTESTATIONS:		

1. The product is wholesome, fit for human consumption, and has free sale in the United States of America.
2. Product of USA. Certified for Export- Taiwan
3. Eggs originate from flocks located in the following county(-ies), state(s): *Insert county(-ies), state(s) where laying flocks are located.*
4. Processing/Packing facility: *Insert address of processing/packing facility.*
5. Eggs were processed/packaged: *Insert date(s) of processing/packaging.*
6. All shell eggs are transported in new packaging material.
7. Shipping container sealed with Seal No. #####

	CERTIFICATION	
DATE:	PRINTED NAME:	
	SIGNATURE:	

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0128. The time required to complete this information collection is estimated to average 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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