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|  | FEDERATIVE REPUBLIC OF BRAZILMINISTRY OF AGRICULTURE, LIVESTOCK AND FOOD SUPPLY - MAPASECRETARIAT OF ANIMAL AND PLANT HEALTH AND INSPECTION - SDADEPARTMENT OF INSPECTION OF ANIMAL ORIGIN PRODUCTS - DIPOA**REGISTRATION FORM FOR LABELS OF IMPORTED PRODUCTS OF ANIMAL ORIGIN** |

**1 – IDENTIFICATION**

|  |
| --- |
| **1.1 - No. of veterinary/health control of producing establishment in the country of origin:**  |
| **1.2 - Name and address of the central agency in charge of the veterinary/health control of producing establishment:** |
| **1.3 - Number of product registration in the Ministry of Agriculture of Brazil:**  |
| **1.4 Date of submission to DIPOA:.............../.............../...............** |
| **1.5 – Corporate name (name) of producing establishment**:  |
| **1.6 - Address of producing establishment:** |

**2 - APPLICATION**

|  |
| --- |
| **Dear Sir/Madam Director of DIPOA,** **The above named company, through its legal representative and its technical manager, requests from this Department the procedure ticked in item 3 of this sheet.** |

**3 - TYPE OF REQUEST**

|  |
| --- |
|  **3.1 - Request:** |
| **3.1.1. - 🗸 REGISTRATION** | 3.1.2. - 🞏 CHANGE IN COMPOSITION/MANUFACTURING PROCESS |
| 3.1.3. - 🞏 CHANGE IN THE LABEL  | 3.1.4. - 🞏 CANCELATION |

**4 - PRODUCT IDENTIFICATION**

|  |
| --- |
|  **4.1. - Product Name (Trade name) – original and in Portuguese:**  |
|  **4.2 - Brand:**  |

**5 – CHARACTERISTICS OF LABEL AND PACKAGING**

|  |
| --- |
| **5.1 - Label:** |
| **5.1.1. -**  🞏 **PRINTED**  5.1.3. - 🞏 RELIEF PRINTING 5.1.5. - 🞏 LITHOGRAPHY |
| **5.1.2. - 🗸 ADHESIVE LABEL** 5.1.4. -🞏 HEAT PRINTING 5.1.6. - 🞏 OTHER (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |
| **5.2 – Packaging:**  |
| 5.2.1. - 🞏 CAN 5.2.2. - ⁪ PAPER 5.2.3. - 🞏 PLASTIC 5.2.4. - 🞏 NATURAL PACKAGING 5.2.5. - 🗸OTHER (\_\_\_\_\_\_\_\_\_) |

**6 – QUANTITY AND FORM OF IDENTIFICATION**

|  |
| --- |
|  **6.1 - Quantity of product packed and the unit of measure used:**   |
|  **6. 2 - Manufacturing or packaging date and shelf life (place and manner of statement):**   |

**7 - PLACE AND DATE :**

|  |
| --- |
|  |
|  |

**8 - AUTHENTICATION**

|  |  |
| --- | --- |
|  |  |
|  |  |
| **Signature and stamp of the legal representative of producing establishment** | **Signature and stamp of the technical manager of producing establishment** |

**(\*) Sequential number, followed by a slash and the number of official registration of the establishment at the Veterinary Inspection Service or Health Inspection Service. The registration number must be indicated on the label and on the international health certificate of products exported to Brazil.**

**Model as per Circular Letter DIPOA No. 42/2010**

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|  | FEDERATIVE REPUBLIC OF BRAZILMINISTRY OF AGRICULTURE, LIVESTOCK AND FOOD SUPPLY - MAPASECRETARIAT OF ANIMAL AND PLANT HEALTH AND INSPECTION - SDADEPARTMENT OF INSPECTION OF ANIMAL ORIGIN PRODUCTS - DIPOA**REGISTRATION FORM FOR LABELS / IMPORTED PRODUCTS OF ANIMAL ORIGIN** |

**9 - IDENTIFICATION**

|  |
| --- |
| 9.1 - No. of veterinary/health control of producing establishment:  |
| 9.2 - Number of product registration at the Ministry of Agriculture of Brazil:  |

**10 – COMPOSITION**

|  |  |  |
| --- | --- | --- |
| **10.1 - Ingredients** | **KG OR L** | **PERCENTAGE (%)** |
|  | **KG** | **100%** |
|  |  |  |
| **TOTAL** |  | **100%** |

**11 - MANUFACTURING PROCESS**

|  |
| --- |
| **Description:**  |

|  |  |
| --- | --- |
|  | FEDERATIVE REPUBLIC OF BRAZILMINISTRY OF AGRICULTURE, LIVESTOCK AND FOOD SUPPLY - MAPASECRETARIAT OF ANIMAL AND PLANT HEALTH AND INSPECTION - SDADEPARTMENT OF INSPECTION OF ANIMAL ORIGIN PRODUCTS - DIPOADIVISION FOR INTERNATIONAL TRADE CONTROL - DCI**REGISTRATION FORM FOR LABELS / IMPORTED PRODUCTS OF ANIMAL ORIGIN** |

**11 - MANUFACTURING PROCESS (cont.)**

|  |
| --- |
| **Description:** |
|  |

**12 - PACKAGING SYSTEM**

|  |
| --- |
| **Description:** |

**13 - STORAGE**

|  |
| --- |
| **Description:** |

**14 - QUALITY CONTROL / PRODUCT CONSERVATION**

|  |
| --- |
| **Description:** |
|  |

|  |  |
| --- | --- |
|  | FEDERATIVE REPUBLIC OF BRAZILMINISTRY OF AGRICULTURE, LIVESTOCK AND FOOD SUPPLY - MAPASECRETARIAT OF ANIMAL AND PLANT HEALTH AND INSPECTION - SDADEPARTMENT OF INSPECTION OF ANIMAL ORIGIN PRODUCTS - DIPOADIVISION FOR INTERNATIONAL TRADE CONTROL - DCI**REGISTRATION FORM FOR LABELS / IMPORTED PRODUCTS OF ANIMAL ORIGIN** |

**15 – PRODUCT TRANSPORTATION**

|  |
| --- |
| **Description:** |

**16 - IMPORTER INFORMATION**

|  |
| --- |
| **Please indicate the place and manner of affixing the information on the importer :** |

**17 - DOCUMENTS ATTACHED**

|  |
| --- |
| **Please list:** |

**18 - PLACE AND DATE**

|  |
| --- |
|  |
|  |

**19 - AUTHENTICATION**

|  |  |
| --- | --- |
| **Signature and stamp of the legal representative of the producing establishment** | **Signature and stamp of the technical manager of the producing establishment** |

|  |  |
| --- | --- |
|  | FEDERATIVE REPUBLIC OF BRAZILMINISTRY OF AGRICULTURE, LIVESTOCK AND FOOD SUPPLY - MAPASECRETARIAT OF ANIMAL AND PLANT HEALTH AND INSPECTION - SDADEPARTMENT OF INSPECTION OF ANIMAL ORIGIN PRODUCTS - DIPOADIVISION FOR INTERNATIONAL TRADE CONTROL - DCI**REGISTRATION FORM FOR LABELS /IMPORTED PRODUCTS OF ANIMAL ORIGIN** |

**FORM TO BE USED BY THE VETERINARY/HEALTH AUTHORITY IN CHARGE OF HEALTH AND HYGIENE CONTROL ONLY**

**1 - IDENTIFICATION**

|  |
| --- |
| **1. 1. – Corporate name of producing establishment:** |
| **1. 2. No. of veterinary/health control of producing establishment:** |
| **1.3 - Number of product registration at the Ministry of Agriculture of Brazil: .............................../.................................(\*)** |

**2 - CERTIFICATION OF VETERINARY / HEALTH AUTHORITY**

|  |
| --- |
| **I, the undersigned, certify that:** |
| 1. The company implements the quality control methods informed in an appropriate manner; 2. The facilities, equipment and production flow are appropriate and approved for the development of the product; 3. The company implements the manufacturing process and meets the product composition as described; 4. The establishment has the qualification required to manufacture and export the product to the Brazilian market.  |

**3. COMMENTS**

|  |
| --- |
|  |
| **4. PLACE AND DATE** |
|  |
| **5. AUTHENTICATION** |
| **Full name of Veterinary/Health Service official in charge of producing establishment** | **Signature and Stamp of Veterinary/Health Service official in charge of producing establishment** |