

REQUEST FOR CERTIFICATE OF CONFORMITY*

*Request for CoC for Food Products Exported to KSA

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.

SERVICE LEVEL AGREEMENT (SLA) REFERENCE (if available)

DATE

EXPORTER		IMPORTER	
Company Name			
Company Address			
Contact Person			
E-Mail Address			
Telephone No.			
Commercial Registration No.			
Certificate of Origin No. & Date		Warehouse Licence No.	
Proforma Invoice No. & Date		L/C No.	
AWB No.		BL No.	
Other, please specify			
I/We declare that the Importer is registered with SFDA		<input type="checkbox"/> Yes	<input type="checkbox"/> No
I/We declare that the Importer has registered the product with SFDA		<input type="checkbox"/> Yes	<input type="checkbox"/> No
I/We declare that the Exporter is registered with SFDA as a foreign establishment		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you registered in INLIGHT for Fast Track Shipment Certification?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, INLIGHT ID No.		Registered Supply Chain ID No.	
Have you changed any suppliers for the products registered in INLIGHT?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you have changed the supplier, please specify			
Applicant Type	<input type="checkbox"/> Authorized Dealer <input type="checkbox"/> Authorized Distributor <input type="checkbox"/> Manufacturer <input type="checkbox"/> Producer <input type="checkbox"/> Third-Party Logistics <input type="checkbox"/> Trader <input type="checkbox"/> Other, please specify		
PRODUCT CATEGORY			
<input type="checkbox"/> Beverages & mixes	<input type="checkbox"/> Cereals, Pulses & derived products	<input type="checkbox"/> Coffee & Tea	<input type="checkbox"/> Dairy products <input type="checkbox"/> Fish & Aquaculture
<input type="checkbox"/> Food Additives	<input type="checkbox"/> Food Supplements	<input type="checkbox"/> Honey	<input type="checkbox"/> Infant Formula <input type="checkbox"/> Meat & Meat products
<input type="checkbox"/> Nuts & Seeds	<input type="checkbox"/> Prepared Food & Instant Food Mixes	<input type="checkbox"/> Oils & Fats	<input type="checkbox"/> Sauces <input type="checkbox"/> Poultry products
<input type="checkbox"/> Spices	<input type="checkbox"/> Processed Fruits & Vegetables	<input type="checkbox"/> Sugar	<input type="checkbox"/> Sweet & Chocolate
<input type="checkbox"/> Others, please specify:			

SHIPMENT LOCATION (where goods are available for inspection, if different from Applicants details)

PAYER (party responsible for paying the certification service, if different from Applicants details)

Company Name				
Company Address				
Contact Person				
E-Mail Address				
Telephone No.				
Payment Type	<input type="checkbox"/> Cash	<input type="checkbox"/> Credit	Intertek Credit Reference No.	Invoice Currency to be used
Addresses for invoices to be sent				

SHIPMENT DETAILS

Port of Loading			Port of Discharge		
Vessel Name			Delivery (full/partial)	<input type="checkbox"/> Full	<input type="checkbox"/> Partial
Gross Consignment Weight			Country of Supply		
Goods Availability Date			Expected Shipment Date (if available)		
Mode of Transport	<input type="checkbox"/> Air	<input type="checkbox"/> Rail	<input type="checkbox"/> Road	<input type="checkbox"/> Sea	
Mode of Shipment	<input type="checkbox"/> Bulk	<input type="checkbox"/> FCL	<input type="checkbox"/> LCL	<input type="checkbox"/> Tanker	<input type="checkbox"/> Trailer
Quantity				<input type="checkbox"/> Truck	<input type="checkbox"/> Bulk
Other Mode of Shipment (please specify)					
No. of Container	20' Container		40' Container		Others, please specify:

DECLARATION

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 (a) Physical signature (Handwritten); or (b) Digital signature (Digital image of the signature); or (c) Electronic signature (Printed Name); or (d) Company Stamp (Physical or Digital images).

DOCUMENTS ATTACHED TO THIS APPLICATION

<input type="checkbox"/> B/L or AWB	<input type="checkbox"/> Certificate of Origin	<input type="checkbox"/> Commercial Registration Certificate	<input type="checkbox"/> Copy of Label & Markings
<input type="checkbox"/> Halal Certificate	<input type="checkbox"/> Halal Slaughter Certificate	<input type="checkbox"/> L/C	<input type="checkbox"/> Packing List
<input type="checkbox"/> Phytosanitary Certificate	<input type="checkbox"/> Proforma Invoice	<input type="checkbox"/> Test Reports	<input type="checkbox"/> Veterinary/Health Certificate
<input type="checkbox"/> Other, please specify			

NOTE: Subject to the product type, some of these documents are mandatory and therefore shipment certification of such products cannot be processed until the relevant documents are submitted.

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.

Download the latest version of Adobe Acrobat here - <https://get.adobe.com/uk/reader>

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NOTE: Please complete the below required details if this information has **NOT** been made available in the submitted invoice/shipment documents or has **NOT** been provided separately in editable electronic format (e.g. word, excel, rich text format document). Should you require additional space, please attach **EXTRA SHEETS** using the same template as below.

REQUEST FOR CERTIFICATE OF CONFORMITY CONTINUATION PAGE:

SN	PRODUCT DESCRIPTION	HS CODE	PRODUCT REGISTRATION NO.	BATCH NO.	QUANTITY	PACKING	PRODUCTION DATE	EXPIRATION DATE	BRAND	COUNTRY OF ORIGIN	MANUFACTURER'S NAME & ADDRESS	STANDARD REFERENCE
01												
02												
03												
04												

Additional information provided on separate sheets **Yes** (No. of additional sheets) **No**

In general, the applicant acknowledges that all imported goods which are subject to specific programme requirements may be randomly selected for inspection and testing for safety, quality and trade compliance purposes at the customs territory of the importing country. Intertek performs the evaluation of conformity based on a random sampling of their products and on testing of limited parameters through risk assessment approach. The applicant agrees to take responsibility and acknowledges that they are aware of the customs legislative and regulatory requirements governing the import of their products and commit to comply with those requirements.

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