



**RECORDING INFORMATION ON FORM SC-356**

Record the necessary information for inspection of a lot on the "Application for Inspection and Certificate of Sampling" Form SC-356. See the example of the SC-356 on the final pages of this instruction for letter codes shown as red letters that align with the fields described below.

- a. To be completed by USDA,
- b. Name, address and E-mail address of applicant,
- c. Name and address of receiver or buyer,
- d. Name of party requesting the inspection if other than the applicant,
- e. Contract or order number if applicable,
- f. Date available for sampling/inspection,
- g. Where and to whom the certificate and fee bill are to be mailed,
- h. Method of delivery of distribution,
- i. Type and name of product,
- j. Location of product where sampling is to take place and contact information for that location,
- k. Type of packing and packaging,
- l. Information on previous inspections of the same lot or portions of the lot (if applicable) including certificate numbers and area office where certified.
- m. Quality requirements of the receiver, if applicable.
- n. Additional requirement(s) of inspection request.
- o. Applies to "Unofficial Sample(s) Submitted by Applicant" only. Check box to indicate. The requesting party should also complete the name and title of requestor and signature of requestor blocks on the Certificate of Sampling (reverse side) of the Application for Inspection.
- p. Applies to Section 8e Import Product Inspection only.  
Enter the following additional information in this section:
  - Importer of record,
  - Date of arrival,
  - Port of entry,
  - Name of vessel and voyage number,
  - Customs entry number,
  - Bill of lading number,
  - Broker's reference number,
  - FCE number,
  - Port of export,
  - Harmonized Tariff Code for the commodity being imported,

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Effective Date: June 2017

Page 2 of 5

- Container number, and
  - Country of origin of the product.
- q. Applies to Export Certification only.  
Enter the following additional information in this section:
- Port of export,
  - Port of entry,
  - Vessel name,
  - Voyage number,
  - Date of freezing,
  - Freezing temperature, and
  - Storage temperature of the product.
- r. Lot number,  
Size,  
Description,  
Number and type of containers in each case, and  
Container code marks.

U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE <b>APPLICATION FOR INSPECTION AND CERTIFICATE OF SAMPLING</b>				APPLICATION TAKEN BY (Initials) <b>a</b>	DATE	HOUR
NAME AND MAILING ADDRESS OF APPLICANT (Include City, State, ZIP)  <b>b</b>  Enter your E-Mail Address here:			NAME AND MAILING ADDRESS OF RECEIVER OR BUYER (Include City, State, ZIP)  <b>c</b>			
IF REQUESTED BY OTHER THAN APPLICANT, SPECIFY NAME OF PARTY <b>d</b>		CONTRACT OR ORDER NUMBER <b>e</b>		DATE AVAILABLE FOR SAMPLING/INSP. <b>f</b>		
NOTE: Mark an "X" in appropriate blocks						
MAIL CERTIFICATE AND FEE BILL TO <input type="checkbox"/> APPLICANT <input type="checkbox"/> OTHER (Specify) <b>g</b>			DISTRIBUTION INSTRUCTIONS <b>h</b> <input type="checkbox"/> FAX <input type="checkbox"/> USPS <input type="checkbox"/> OVERNIGHT <input type="checkbox"/> EXPRESS GROUND MAIL <input type="checkbox"/> OTHER			
TYPE OF PRODUCT <input type="checkbox"/> CANNED <input type="checkbox"/> FROZEN <input type="checkbox"/> DRIED <input type="checkbox"/> DEHYDRATED <input type="checkbox"/> OTHER NAME OF PRODUCT <b>i</b>			LOCATION OF PRODUCT (Name, Address, and Phone)  <b>j</b>			
TYPE OF CASE <input type="checkbox"/> NONE <input type="checkbox"/> DOMESTIC <input type="checkbox"/> OTHER (Specify) <b>k</b>			CASE MARKS (Specify in "Remarks" on reverse) <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> SPECIAL			
PRODUCT PREVIOUSLY GRADED <input type="checkbox"/> NO <input type="checkbox"/> YES (if "Yes", give Certificate Number) <b>l</b>			FIELD OFFICE WHERE GRADED			
REPORT RESULTS IMMEDIATELY AFTER GRADING TO <input type="checkbox"/> APPLICANT <input type="checkbox"/> OTHER (Specify)			QUALITY REQUIREMENTS OF RECEIVER <b>m</b>			
ADDITIONAL REQUIREMENTS (Check all that apply) <b>n</b>						
<input type="checkbox"/> Certificate of Date of Pack (Federal or State Agencies)			<input type="checkbox"/> "Officially Sampled" stamp on cases. Stamp this form when accomplished			
<input type="checkbox"/> Condition of Container Examination (Federal or State Agencies) Attach Form AD-748 or 741			<input type="checkbox"/> Checkloading Required Date: _____			
<input type="checkbox"/> USDA Contracts—Country of Origin Certification and Traceability Documents. (Plant Survey and Food Defense System Survey required) or Plant Systems Audit			<input type="checkbox"/> Unofficial Sample Submitted by Applicant. See terms and signature request on reverse side of this form <b>o</b>			
SECTION 8e IMPORT PRODUCT INSPECTION: <b>p</b>						
Importer of Record	Date of Arrival	Port of Entry	Name of Vessel/Voyage No.	Customs Entry No.	Bill of Lading No.	
Broker's Reference No.	FCE No.	Port of Export	Harmonized Tariff Code	Container No.	Country of Origin	
<input type="checkbox"/> EXPORT CERTIFICATE: <b>q</b>						
Port of Export	Port of Entry	Name of Vessel	Voyage No.	Date of Freezing	Freezing Temp. °C.	Storage Temp. °C.
<input type="checkbox"/> OTHER: PLEASE SPECIFY IN REMARKS						
LOT NO.	LOT SIZE AND DESCRIPTION	NO. AND TYPE OF CONTAINERS IN CASE <b>r</b>	CODE MARKS IN LOT <input type="checkbox"/> EMBOSSED <input type="checkbox"/> INK STAMPED <input type="checkbox"/> INK JET <input type="checkbox"/> OTHER			NO. SAMPLES
ADDITIONAL SAMPLE UNITS FOR: <input type="checkbox"/> ANALYTICAL <input type="checkbox"/> USDA REVIEW <input type="checkbox"/> MONTHLY REVIEW <input type="checkbox"/> OTHER _____						

REMARKS:

THIS IS TO CERTIFY that in compliance with the regulations of the Secretary of Agriculture governing the inspection of processed fruits and vegetables pursuant to the Agricultural Marketing Act of 1946, as amended, I have this day drawn samples believed by me to be representative of the lots described above.

DATE		ADDRESS OF SAMPLER OR FIELD OFFICE				OFFICIAL SAMPLER PRINT AND SIGN NAME						
DATE	DRIVING (HRS)	SAMPLING (HRS)	STAMPING (HRS)	CONDITION (HRS)	CHECKLOADING (HRS)	PRODUCT EXAM (HRS)	OTHER (HRS)	TOTAL HOURS	OVERTIME (HRS)	NIGHT DIFF (HRS)	INSP INT.	

(OVER)



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