OMB NO. 0581-0167 SERIAL NO.

U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE SPECIALTY CROPS PROGRAM

IMPORTER'S EXEMPT COMMODITY FORM (SC-6)

The following statements are made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995. The authority for requesting the information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 271, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to information provided on this form.

NOTE: This form is used to declare intent to import an agricultural commodity exempt from grade requirements for the commodity established under section 8e of the Agricultural Marketing Agreement Act of 1937.

WARNING: Any person who knowingly falsely makes, issues, alters, forges or counterfeits this form, or participates in any such actions, is subject to a fine or imprisonment for not more than five (5) years, or both.

THIS FORM MAY NOT BE DUPLICATED

INSTRUCTIONS TO COMPLETE FORM ARE PRINTED ON THE NEXT PAGE					
SEC	CTION TO BE COMPLETE	ED BY IMPORTER			
1. PRODUCT (include variety)		2. DATE AND PLACE OF INSPECTION (if applicable)			
3. LOT IDENTIFICATION		VEHICLE IDENTIFICATION (railroad car, truck, vessel, carrier, tag number, etc.)			
5a. IMPORTER'S NAME AND COMPLETE MAILING ADDRESS (P.O. Box, Street, City, State, ZIP Code)		6a. PLACE OF ENTRY (PORT OF UNLOADING)			
		6b. DATE OF ENTRY			
5b. TELEPHONE NUMBER (include area code)	5c. FAX NUMBER (include area code)	7. TOTAL QUANTITY IMPORTED (pounds)			
8a. RECEIVER'S NAME AND COMPLETE MAILING ADDR	ESS (P.O. Box, Street, City, State, ZIP Code)	9. INTENDED USE (Mark an "X" in appropriate box) Processing (describe type):			
8b. TELEPHONE NUMBER (include area code)	8c. FAX NUMBER (include area code)	Livestock/Animal Feed Other exempt use (specify):			
10a. U.S. CUSTOMS AND BORDER ENTRY NUMBER	10b. HARMONIZED TARIFF CODE NUMBER				
CERTIFICATION STATEMENT: I certify to the U.S. Depa or specialty crops being imported are identified above SIGNATURE		otection that the above is true and accurate and that none of the fruit, vegetable, re. DATE			
SECTION TO BE COMPLETED BY RECEIVER					
RECEIVER'S NAME AND COMPLETE MAILING ADDRESS (P.O. Box, Street, city, State, ZIP Code) TELEPHONE NUMBER (Include area code)					

SECTION TO BE COMPLETED BY RECEIVER					
RECEIVER'S NAME AND COMPLETE MAILING ADDRESS (P.O. Box, Street, city, State, ZIP Code)		TELEPHONE NUMBER (Include area code)			
CERTIFICATION STATEMENT OF PROCESSOR, CHARITY, FEEDER OR OTHER EXEMPTED RECEIVER					
I hereby certify to the U.S. Department of Agriculture that I have received the exempt commodity shipment(s) cited above and that I will dispose of the shipment(s) pursuant to the intended use specified in "9" and the commodity's Import Regulation under 7 CFR, Parts 944, 980, or 999, and that I am one of the following: (Mark an "X" in appropriate box)					
X Processing (describetype):		X Livestock/Animal Feed y			
	CX Other exempt use (specify):				
SIGNATURE	TITLE		DATE		

PLEASE READ INSTRUCTIONS CAREFULLY

SECTION I

TO BE COMPLETED BY THE IMPORTER – Upon completion of Section 1, the importer or the customs broker on behalf of the **IMPORTER** shall:

• **e-Sign** Section I certifying accuracy of the information entered in Section I and that the exempt commodity shipment is being sent to the exempt receiver listed in No. 8a.

SECTION II

TO BE COMPLETED BY THE RECEIVER – the EXEMPT RECEIVER shall:

e-Sign Section II certifying receipt of the shipment listed in Section 1 and agreeing to dispose
of the shipment in the exempt outlet specified.

MAILING INSTRUCTION

If the importer and receiver are unable to submit the electronic copies through CEMS, please print
out the completed SC-6 and send copies to USDA, AMS, Specialty Crops Program, Marketing
Order and Agreement Division, 1400 Independence Avenue SW, Room 1406-S, Stop 0237,
Washington, D.C. 20250-0237.

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