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|  | **APPLICATION COVERSHEET - for a Biosecurity Authority/Clearance Certificate (BACC)** | No. of pages:  |
| AGENT DETAILS:  | CONTACT PHONE:  |
| CONTACT NAME:  | RETURN EMAIL / FAX:  |
| CONSIGNMENT DETAILS:I.E/E.C.I No.       | EDI TARIFF CODE(s) – if applicable:       |
| NAME OF IMPORTER:  | NAME OF EXPORTER: |
| VESSEL  |  | # | **Commodity/Species** | **Quantity/****Units** | **Measure**(Kg / /M³) |
| VOY/FLIGHT:  |  | **1** |       |       |       |
| SHIPPING CO / AIRLINE:  |  | **2** |       |       |       |
| COUNTRY OF ORIGIN:  |  | **3** |       |       |       |
| DATE OF ARRIVAL:  |  | **4** |       |       |       |
| BL / AWB:  |  | # | **Container #s:**(use continuation sheet if req.- pg 2) | FCL | LCL |
| HAWB:  |  | **1** |       | [ ]  | [ ]  |
| DISCHARGE PORT: |  | **2** |       | [ ]  | [ ]  |
| **Provide documentation as applicable including:**[ ]  Bill of lading / AWB [ ]  Relevant invoices [ ]  Certificates [ ] Quarantine Declaration[ ] Permit to Import & Permit No. [ ]  IHS Name:  | **3** |       | [ ]  | [ ]  |
|  | **4** |       | [ ]  | [ ]  |
|  | **5** |       | [ ]  | [ ]  |
| **Transitional Facility- For Devanning/Inspections:** |
| **Treatment Supplier (If Req.):**  |
| **CHARGE DETAILS.** Payment will be made by: | Account [ ]  Cash / cheque [ ]  (EFTPOS is available at MPI office) |
| **Account Holder:**  | **Account #:**  |
| **Importer/Agent Co Name**:  | **Client Ref / Job #:** (To appear on invoice)  |
| I confirm that the information given is correct and MPI has the authority to charge the above account holder, who accepts all MPI charges associated with this consignment. Should I/my company request a duplicate BACC for this consignment, then I/my company will be charged for that. I/my company understand that this Application Coversheet will be returned by MPI if insufficient information has been supplied. |  | Date:       |
| Full Name:  | Signature: | Date:       |
| **Please fax all documents to Cargo Risk Profiling on (09) 909 8584** |

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| **APPLICATION COVERSHEET-** **for a Biosecurity Authority/Clearance Certificate (BACC)****- Continuation Sheet (from Pg 1)** |
| Please use this sheet if you wish to supply further commodity/container information with your application. |
| NAME OF IMPORTER:       |
| **I.E./E.C.I** No.       |  |
| BL / AWB:       | HAWB:       |
| **Container Reference(s)**- *pick up from below* | **Commodity/species** | **Quantity /****Units** | **Measure** (Kg / M³) |
|       |       |       |       |
|       |       |       |       |
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|       |       |       |       |
| **#** | **Container number** | **FCL** | **LCL** |  | **#** | **Container number** | **FCL** | **LCL** |
| **6** |       | [ ]  | [ ]  | **18** |       | [ ]  | [ ]  |
| **7** |       | [ ]  | [ ]  | **19** |       | [ ]  | [ ]  |
| **8** |       | [ ]  | [ ]  | **20** |       | [ ]  | [ ]  |
| **9** |       | [ ]  | [ ]  | **21** |       | [ ]  | [ ]  |
| **10** |       | [ ]  | [ ]  | **22** |       | [ ]  | [ ]  |
| **11** |       | [ ]  | [ ]  | **23** |       | [ ]  | [ ]  |
| **12** |       | [ ]  | [ ]  | **24** |       | [ ]  | [ ]  |
| **13** |       | [ ]  | [ ]  | **25** |       | [ ]  | [ ]  |
| **14** |       | [ ]  | [ ]  | **26** |       | [ ]  | [ ]  |
| **15** |       | [ ]  | [ ]  | **27** |       | [ ]  | [ ]  |
| **16** |       | [ ]  | [ ]  | **28** |       | [ ]  | [ ]  |
| **17** |       | [ ]  | [ ]  | **29** |       | [ ]  | [ ]  |