



Republic of the Philippines Department of Agriculture
Bureau of Agriculture and Fisheries Standards
 BPI Compound, Visayas Avenue, Diliman, Quezon City
 Email: register.bafs@gmail.com Website: www.bafs.da.gov.ph

Form No.: OARS-05-IEC

Application Tracking No.
(For OARS Use Only)

ORGANIC AGRICULTURE DIVISION - REGISTRATION SECTION

APPLICATION FOR ORGANIC INPUT IMPORTATION/EXPORTATION CLEARANCE

INSTRUCTION: Print legibly and mark appropriate boxes with . Submit Duly Accomplished Application Form No. OARS-05-IEC. All mark with **askterisk (*)** must be filled up. Only DA-BAFS' registered producers, with approved EUP or with an ongoing application for OC through DA-BAFS officially accredited OCB can import or export organic input (OSA and OBICA) products. Likewise, only DA-BAFS' registered organic input products can be imported or exported. Applicant shall submit the required documents together with this accomplished application form at least two (2) days prior arrival or departure of organic input products to be imported or exported.

| | | |
|---------------------------------------|---|---|
| Organic Input Product Category | <input type="checkbox"/> Organic Soil Amendments (OSA) <input type="checkbox"/> Organic Bio-Control Agents (OBICA) | Purpose |
| | | <input type="checkbox"/> Experimental Use <input type="checkbox"/> Commercial Use <input type="checkbox"/> Sample for Organic Certification |

I. APPLICANT INFORMATION

1.1 *Business/Company Name

| | |
|--|--------------------------------|
| | *Tax Identification No. (TIN): |
|--|--------------------------------|

*Business/Company Address

| | | | |
|-------------------|----------|---------------------|----------|
| Unit/Block/No. | Street | Subdivision/Village | Barangay |
| Municipality/City | Province | Country | Zip Code |

1.2 *Name of Company Owner/Authorized Representative

| | | | |
|---------|------------|----------------------------|-------------|
| Surname | First Name | Extension Name (Jr/Sr/III) | Middle Name |
|---------|------------|----------------------------|-------------|

| | | | |
|--|-----------|--------------------|--------------------|
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | *Position | *Contact Number(s) | *Email Address(es) |
|--|-----------|--------------------|--------------------|

II. DESCRIPTION

| | |
|--------------------------------|---|
| *Country of Origin/Destination | *Company Name of the Supplier/Consignee |
|--------------------------------|---|

*Company Address of the Supplier/Consignee

| | | |
|-------------------------|--------------------|--------------------|
| *Name of Contact Person | *Contact Number(s) | *Email Address(es) |
|-------------------------|--------------------|--------------------|

| | |
|---------------------------------|--------------------------|
| *Port of Loading (if available) | * Mode of Transportation |
|---------------------------------|--------------------------|

| | | |
|-----------------------------|---------------------------|--------------------------------|
| *Estimate Date of Departure | *Estimate Date of Arrival | *Philippine Port of Entry/Exit |
|-----------------------------|---------------------------|--------------------------------|

| *Items (Specify Product Category) | *Brand Name | *Quantity |
|-----------------------------------|-------------|-----------|
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I declare that the information I have provided herein including the attachments are true and correct to the best of my knowledge. I hereby authorize DA-BAFS to collect such information for purposes of record keeping, promotion of Organic Agriculture, and share business information to affiliates and necessary third parties for any legitimate business purposes.

Applicant's Name and Signature:

Authorized Representative's Signature

Authorized Representative's Printed Name

Date: Day/Month/Year
