

# FDA PRIOR NOTICE & SHIPPING ASSISTANCE FORM

**ALL FIELDS REQUIRED**



**DAIRYLAND**  
Laboratories, Inc.

Name of Shipper: \_\_\_\_\_ Dairyland Acct #: \_\_\_\_\_

Address: \_\_\_\_\_

Country in Which Material was Produced: \_\_\_\_\_

Country Containing Business Location of Shipper: \_\_\_\_\_

Country From Which Article is Shipped: \_\_\_\_\_

Number of Packages: \_\_\_\_\_

Shipping Date: \_\_\_\_\_

Courier: \_\_\_\_\_

Tracking Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax: \_\_\_\_\_

**Check box if necessary:**  
I request Dairyland Laboratories, Inc to generate a commercial invoice and provide UPS Shipment of this sample(s).  
I agree to reimburse the cost of this service.

Please fill out a table for each package to be shipped. Attach an extra sheet if necessary.

Complete Sample Description listed separately	Number of Samples	Total Weight of Samples (ounces)

**\*Total Weight of Package** \_\_\_\_\_

Dairyland Laboratories, Inc., will only submit a notice for animal feed (non-medicated) products, which do not contain animal-origin ingredients. The description needs to be specific, for example: hay, corn silage, small grain silage, haylage, grain, mixed feed ration or soybeans.

I verify that this sample does not contain any animal by-products. I also verify that this information is true and correct to the best of my knowledge, and request Dairyland Laboratories Inc., of Arcadia, WI to submit a Prior Notice of Food Importation to the FDA on my behalf, and agree to reimburse any U.S. Custom fees incurred by Dairyland Laboratories, Inc. Under 18 U.S.C. 1001, anyone who makes a materially false, fictitious, or fraudulent statement to the U.S. Government is subject to criminal penalties.

**Authorized Signature :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Signature:** \_\_\_\_\_

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