

## **Frozen Fruit/Vegetables Compliance Declaration**

This is to certify that the below mentioned **fruit fly host** material/ product have been subject to freezing held at (or below) minus 180C for a minimum of 7days. This frozen consignment has met the BNZ-NPP-Human Import Health Standard on the importation of stored plant products for human consumption into New Zealand.

(i)

**Country of Origin** 

Means of Conveyance (Vessel/Flight No.)

**Pre-treatment details** 

a) Dat	e food commoditie	s were placed in the freezer:					
b) Ten	nperature:						
c) Ren	narks:						
(ii)	Treatment monit	oring (freezing will be monit	ored not le	ess than 4 c	days)		
Days	Common Name	Scientific Name	No. of PKGS	Weight	Date	Freezer Temperature	BAF Officers Signature
		TOTAL					
(iii)	Consignment Det	tails	•				
Consignment Details				Official Verification			
Name and Address of Exporter				BAF Verification officer (Name & Signature)			
Name of Consignee					BAF Officers Name (Issuer of Declaration)		
Distinguishing Marks				Stamp & Signature			

Remarks