

Customs Brokerage FDA Information Request Form

Commodity Details:	
Product Name:	_
Packaging:	_
Tariff Number:	_
FDA Product Code:	_
Consignee Registration Number:	_
Manufacturer:	
Name:Address:	_
Registration Number:	_
Shipper (if different from Manufacturer):	
Name: Address: Registration Number:	
Affirmations of Compliance – Some products regulated by the FDA requinumber, unique to the facility, or a product's approval number, specific to number, etc.):	
Affirmation of Compliance	Number/Code
For list of A of Cs: https://www.fda.gov/media/97480/download	
Delivery Location:	
Name:Address:	
Additional Information:	
The importer of record is responsible to provide any information required any documentation and pictures/labels requested by the Food and Drug A	