



GOVERNMENT OF BERMUDA
 Ministry of Health, Seniors and Environment

Department of Environment and Natural Resources

APPLICATION FOR RELEASE FORM

**DO NOT RELEASE PRODUCE TO CUSTOMERS
 PRESENTING THIS FORM**

Please complete this form, attach a copy of the full invoice and fax or deliver this information to the Plant Protection Laboratory for processing. We will contact you to pick up your release form.

IMPORTER:	
CONTACT PERSON:	
CONTACT NUMBER:	
Release form #:(Office use only):	

COUNTRY/STATE OF ORIGIN:	
EXPORTER:	
NATURE OF SHIPMENT: <i>(I.E. Fruit or Vegetables)</i>	
QUANTITY OF BOXES/BAGS OF PRODUCE:	
DATE OF ARRIVAL:	
AIRLINE/ OCEAN FREIGHT:	
FLIGHT/ CONTAINER NUMBER:	