



Re-Export ← Or → Export after Landing of Domestic Product (tick only one)

Within this form, the term "Export" includes both exports and re-exports

Full Shipment ← Or → Partial Shipment (tick only one)

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| Form Number of Preceding Document (Catch Monitoring Form, or Re-Export/Export After Landing of Domestic Product Form) | |
|---|--|

EXPORT SECTION

| Exporting State/Fishing Entity | Point of Export | | |
|--------------------------------|-----------------|-------------------|----------------------|
| | City | State or Province | State/Fishing Entity |
| | | | |

| Name of Processing Establishment (if applicable) | Address of Processing Establishment (if applicable) |
|--|---|
| | |

| Catch Tagging Form Document Numbers (if applicable) |
|---|
| |

| Description of Fish from previous CDS Document | | | |
|--|-----------------------------------|-------------|--|
| Flag State/Fishing Entity | Date of previous Import/Landing | | |
| Product: F (Fresh) / FR (Frozen) | Type: RD/GGO/ GGT/DRO/DRT/ FL/OT* | Weight (kg) | Total Number of whole Fish (including RD/ GGO/GGT/DRO/DRT) |
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| * For Other (OT): Describe the type of product | | | |

| Description of Fish being Exported | | | |
|--|-----------------------------------|-------------|--|
| Product: F (Fresh) / FR (Frozen) | Type: RD/GGO/ GGT/DRO/DRT/ FL/OT* | Weight (kg) | Total Number of whole Fish (including RD/GGO/GGT/DRO/ DRT) |
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| * For Other (OT): Describe the type of product | | | |

| Destination (State/Fishing Entity) |
|------------------------------------|
| |

| Certification by Exporter : I certify that the above information is complete, true and correct to the best of my knowledge and belief. | | | |
|---|-----------|------|----------------------------|
| Name | Signature | Date | Licence No. / Company Name |
| | | | |

| Validation by Authority : I validate that the above information is complete, true and correct to the best of my knowledge and belief. | | OFFICIAL SEAL |
|--|-----------|---------------|
| Name and Title | Signature | |
| | | |
| | Date | |

IMPORT SECTION

| Final Point of Import | | |
|-----------------------|-------------------|----------------------|
| City | State or Province | State/Fishing Entity |
| | | |

| Certification by Importer : I certify that the above information is complete, true and correct to the best of my knowledge and belief. | | | |
|---|---------|-----------|------|
| Name | Address | Signature | Date |
| | | | |

NOTE: The organization/person which validates the Export section shall verify the copy of the original CCSBT CDS Document. Such a verified copy of the original CCSBT CDS document must be attached to the Re-export/Export after Landing of Domestic Product (RE) Form. When SBT is Exported, all verified copies of concerned forms must be attached.