

FDA Tobacco

Account Number		Account Name	
DUNS Number <i>(if available)</i>		Client Part Number*	
Description of Product <i>(as complete as possible)</i>			
Government Agency Processing Code Select One		Tariff Number	
FDA Product Code <i>(if known)</i>		Country of Origin**	FDA Country of Production**
Cargo Storage Status	Intended Use		
If Intended Use is INV, investigational , please provide name and address for lab or clinical site			

* Part number as shown on Customs document to identify the product (item number, SKU, etc.)

** U.S. Customs considers the country of origin to be the country where the product last underwent a "substantial transformation" (resulting in an increase in value.) The FDA considers the country of origin to be that of the actual manufacturer. Actual manufacturer is defined as the last party involved in the production process.

FDA Actual Manufacturer

Company Name			
Address		City	
State/Province	Zip/Postal Code	Country	
DUNS Number <i>(if available)</i>			

FDA Shipper (As shown on Customs document, BOL or airway bill)

Company Name			
Address		City	
State/Province	Zip/Postal Code	Country	
DUNS Number <i>(if available)</i>			