



## 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 require a product manufacturer's registration number, unique to the facility, or a product's approval number, specific to the product (i.e. NDC number, LST 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 for Food and Drug Transmission as well as any documentation and pictures/labels requested by the Food and Drug Administration.