（別紙様式12　Particular Informations of Establishment (Processed Meat Product)）　　　

**PARTICULARS OF ESTABLISHMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **(1) Name of Establishment** |  | | |
| **(2) Establishment Number** |  | | |
| **(3) Address of Establishment** | | | |
| Unit No. |  | | |
| Street Name |  | | |
| Post Code |  | | |
| District/City |  | | |
| State/Province |  | | |
| **(4) Products Intended for Export to Singapore** | | | |
| **Product name** | | **Species** | **State (Chilled/Frozen/Retort)** |
|  | |  |  |
|  | |  |  |

**SINGAPORE IMPORTER INFORMATION**

|  |  |
| --- | --- |
| **Indicate if contact with Singapore importers has been established** | |
| Yes, please provide the following information.  No | |
| Name of importing company in Singapore |  |
| Name and designation of correspondent |  |
| Business Address |  |
| Telephone / Mobile |  |
| Email address |  |

**SALES CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Please provide the contact details of the Sales Department. This contact point would be provided to interested Singapore importers.** | |
| Name and designation of sales contact person |  |
| Office address (if different from the establishment address) |  |
| E-mail address |  |
| Telephone / Mobile |  |

* 英語で記入すること。