Directorate Food Safety and Quality Assurance

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**APPLICATION FOR A PERMISSION TO DEVIATE FROM THE SET NORMS, STANDARDS AND REQUIREMENTS REGARDING CONTROL OF THE EXPORT OF VEGETABLES AND GRAINS (DISPENSATION) **

1. All sections but 12 are compulsory and must be filled legibly in capital letters. 2. Except in the case of experimental cultivars, an application for dispensation can only be made after an inspection was carried out by the assignee (PPECB) and the consignment rejected**.**

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| 1. Company Name |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Applicant’s Name |  | | | | | | | | | | | | | | | | | | | 3. Designation | | | | | |  | | | |
| 4. Company postal /physical Address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Company’s e-mail address | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Office Telephone number |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Applicant’s Cell No. |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Office Fax number |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Product type  (please tick √) | Dry Beans |  | | Canola seeds | | | | |  | Feed products | | | | |  | | | Groundnuts | | | | |  | | Maize | |  | Barley |  |
| Maize Products |  | | Leguminous Seeds | | | | |  | Lesser known types of maize | | | | |  | | | Sorghum | | | | |  | | Sunflower Seeds | |  | Soybeans |  |
| Onions/Shallots |  | | Potatoes | | | | |  | Rice | | | | |  | | | Tomatoes | | | | |  | | Wheat | |  | Wheat Products |  |
| Popcorns |  | | Treenuts | | | | |  | Vegetables (specify) | | | | | | | | | | | | |  | | Other (specify) | | | |  |
| 10. Cultivar (s) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. Class /Grade Indication  (please tick √) | Extra Class | |  | | | Class 1 | |  | | | Class 2 | | |  | | | Class 3 | | | |  | | |  | | | | | |
| Grade 1 | |  | | | Grade 2 | |  | | | Grade 3 | | |  | | | Other (specify) | | | | | | | | | | | | |
| 12. Moisture Content |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. Deviation  (Why the application) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. Inspector’s name |  | | | | | | | | | | | | | | | 14. Inspector’s Cell no.: | | | | | | | | | |  | | | |
| 16. Region (Production area) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. No. of quantity |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. Final destination |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Mode of transport  (please tick √) | Sea-freight | | | |  | | Road-freight | | | | |  | Air-freight | | | | | |  | | |  | | | | | | | |
| 20. Proposed termination date (Max 1 year) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**FOR OFFICE USE ONLY**

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| **Received on (Date) :** |
| **Processed by (Official):** |
| **File No:** |

**Checklist for dispensation applications**

**Pleasetick**√

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| **1. Completed dispensation application form** |  |
| **2. Rejection report issued by the PPECB** |  |
| **3. Applicant’s letter of motivation (on company’s letter head)** |  |
| **4. Applicant’s action plan** |  |
| **5. An example each of the incorrect/deviating labels or packaging (if available)**  **(photographs or clearly legible scans will also suffice)** |  |