

# U.S. Title 50 Certification Form

(To be filled out by the Aquatic Animal Health Inspector)



I, Certifying Official's Name	_, designated by the Director of the U.S. Fish and Wildlife Service			
ON Date of Most Recent Certification	, as required by Title 50, CFR 16.13, do hereby certify the following:			
1) The fish lot(s) of origin for this shipment of up to a maximum of				
List Numbers, Life Stage(Egg	s or Fish), and Species for This Shipment That Are Covered by This Inspection			
were most recently sampled at				
were most recently sampled at _	Site of Sample Collection (Name and Address)			
on Viral as Date of Sample Collection	says were performed on these samples at			
Nam	ne and Address of Laboratory Conducting the Assays			
	Sampling and viral assays were conducted using			
methodology described in Title 50	0 CFR 16.13.			
2) Oncorhynchus masou virus (OMV), and the viruses causing viral hemorrhagic septicemia (VHS), infectious hematopoietic necrosis (IHN), and infectious pancreatic necrosis (IPN) have not been detected in viral assays of fish lot(s) of origin of eggs or fish.				
3) This shipment is scheduled to depart				
	Site From Which the Fish Will Be Shipped (Name and Address)			
between	and via			
Dates Indicating Tim	e Frame The Shipments Will Take Place			
Means By Which the Shipment Will Be Made	(Include Name of Transport Company and Bill of Lading Numbers, Flight Numbers, Etc. if Known			
crossing into the United States a	t			
	Name of Anticipated Border Crossing			
with the destination of				

4) Other information of relevance:

Signature:		Date:
Name:		
Organization:		
Street Address:		
City:		
State/Province:		
Zip/Postal Code; Country:		
Telephone:	-	
Fax:		

Please provide a copy to the importer and return an **original signed** copy to:

U.S. Fish and Wildlife Service Division of the National Fish Hatchery System 5275 Leesburg Pike Falls Church, VA 22041 USA

Attn: Title 50 Certification

# NOTICES

## PRIVACY ACT STATEMENT

Authority: The information requested is authorized by the Lacey Act (18 U.S.C. 42) and Title 50, Part 16 of the Code of Federal Regulations.

Purpose: The contact information requested is used to fulfill import requests.

**Routine Uses:** The collected information is used by Title 50 Certifying Officials during the import process. Once the health status of the fish or the fish reproductive products has been affirmed, the information is used to complete the request. More information about routine uses can be found in the System of Records Notice, Permits System, FWS-21.

**Disclosure:** Contact information requested on this form is voluntary. However, submission of the requested information is required to obtain or retain a benefit.

## PAPERWORK REDUCTION ACT STATEMENT

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) in order provide the U.S. Fish and Wildlife Service the information necessary to consider your request for importation of salmonide or their eggs under Title 50, Part 16, of the Code of Federal Regulations. Information requested in this form is required to obtain or retain a benefit. Failure to provide all requested information may be sufficient cause for the U.S. Fish and Wildlife Service to deny the request. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1018-0078.

## ESTIMATED BURDEN STATEMENT

Public reporting for this collection of information varies depending on the activity for which a permit is requested. The relevant burden for FWS Form 3-2274 is 30 minutes, including time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, Fish and Wildlife Service, U.S. Department of the Interior, 5275 Leesburg Pike, MS: BPHC, Falls Church, VA 22041-3803. Please do not send your completed application to this address.