



Control No: _____

**APPLICATION FOR THE ISSUANCE OF CERTIFICATE OF ACCREDITATION TO
MEAT TRANSPORT VEHICLES**

Type of Application

- New
 Renewal

Registered Owner : _____

Address: _____

e-mail address: _____

Telephone number: _____ Fax number : _____

Vehicle Identification

Make: _____

Plate number: _____

Engine Number: _____

LTO Certificate of Registration Number: _____

LTO Official Receipt of Registration: _____

Accredited Meat Establishments to be served ;

Destination (*major markets to be served*):

I hereby certify that the above statement are true and correct to the best of my knowledge and the documentary requirements are complete.

Applicant
(Signature over printed name)

(*This portion to be filled out by NMIS authorized representative*) Control No: _____

Date of Application: _____

Date of Release: _____

NMIS authorized representative
(Signature over printed name)

(*Applicant's Copy*)

Control No: _____

Date of Application: _____

Date of Release: _____

Applicant
(Signature over printed name)