Appendix-2H FORMAT OF PRE-SHIPMENT INSPECTION CERTIFICATE

import of shredded, un-shredded, compressed and loose forms of metallic waste and scrap.

This Pre-Shipment Inspection Certificate is issued in terms of paragraph 2.54 of Handbook of Procedure for I, hereby certify the details as below:-(1) I / We hereby certify that I have visually inspected the consignment and certify the following: (a) The imported consignment is actually metallic scrap/seconds/defective as per the internationally accepted parameters for such a classification. (b) The consignment does not contain any symbol related to ionizing radiation and/or any marking related to transport of dangerous goods classified as Class 7 as per United Nations classification. (b) Details of Importer is as follows: (i) Name: (ii) Address: _____ (iii) Importer Exporter Code No._____ (iv) Telephone No. _____ (Mobile) _____ (v) E-mail (b1) Details of Exporter is as follows: (i) Name: (ii) Address: (iii) Telephone No. ______ (Mobile) _____ (iv) E-mail (c) Type of Scrap: Shredded / Un-shredded. (d) Details and quantity of import: Description of metallic scrap Quantity (in MTs) (i) Country of Inspection _____ (e) (ii) Place of Inspection

(iii) Date of Inspection

(iv) Duration of inspect	ion (in hours) from to
(v) In case inspection i	s carried out in a country where PSIA does not have an equipped branch office,
then date of prior intim	ation by email (at psia-dgft@nic.in)
(f) Details of radiation sur	vey meter used:
	 of calibration- it contain any type of arms, ammunition, mines, shells, cartridges, or any other
explosive material in any form,	either used or otherwise, and that the consignment was checked for radiation level
and it does not have radiation le	evels (gamma and neutron) in excess of natural background. Following are the values
(ii) Maximum rad (iii) The radiation fit to be exported (2)The video clip of the inspec dgft@nic.in] and customs Author	tion carried out has been uploaded on DGFT website / e-mailed to DGFT [at psia-
has been concealed or held the	re from.
Date	Signature
Seal of PSIA	Name of the Inspecting Person/Inspector Designation Address (office) E Mail Address
	Phone Number Name of the agency as per Appendix 2G Address: Telephone Number E mail