



Canadian Food Inspection Agency
Agence canadienne d'inspection des aliments

REQUEST FOR DOCUMENTATION REVIEW

DEMANDE DE RÉVISION DE DOCUMENTS

EDI

National Import Service Centre Canadian Food Inspection Agency 1050 Courtney Park Drive East, Mississauga, Ontario L5T 2R4 Facsimile: (613) 773-9999 Telephone and EDI: 1-800-835-4486 or 1-289-247-4099		Expédier certificats originaux à : Centre de service à l'importation - National Agence canadienne d'inspection des aliments 1050, Promenade Courtney Park Est Mississauga, (Ontario) L6T 2R4 Télécopieur: (613) 773-9999 Téléphone: 1-800-835-4486 ou 1-289-247-4099	
No. of pages including cover sheet Nbre de pages incluant la page couverture <u>5</u>	Driver Waiting / Camionneur en attente <input type="checkbox"/> Yes / Oui <input checked="" type="checkbox"/> No / Non	or ou	Estimated arrival time Heure d'arrivée approximative <u>2019-01-01 6:00 PM</u>
Broker / Courtier (or Importer / ou Importateur) Farrow		Facsimile No. / N° de télécopieur 5192504852	
Contact Name / Personne ressource TIFFANY HARRIS		Telephone No. / N° de téléphone 519-966-3003	Extension / Poste Ex.680
TRANSACTION No. / N° DE TRANSACTION <div style="border: 1px solid black; padding: 2px;"> 2 9 2 5 6 0 0 8 1 1 4 1 5 1 </div>		Importer / Importateur Loblaws	
CBSA release office / Bureau de mainlevée (ASFC) 440 SARNIA		COMMODITY / PRODUITS BLUEBERRIES (CL)	QUANTITY / QUANTITÉ 1560 CTNS
Delivery Address / Adresse de livraison 1105 FOUNTAIN ST CAMBRIDGE ON			
MEAT SHIPMENT (Name and number of registered reinspection establishment) EXPÉDITIONS DE VIANDE (Nom et numéro de l'établissement agréé de réinspection)		UNMARKED MEAT SHIPMENT (Name and number a processing establishment of destination) EXPÉDITIONS DE VIANDE NON MARQUÉE (Nom et numéro de l'établissement de transformation comme destination)	
TRANSPORT Vessel name or Transportation Co. TRANSPORT Nom du navire ou Cie de transport 7C57 QUICK CARGO		Voyage Number / N° de voyage	
Container Number / N° de conteneur	First Point of Entry in Canada / Premier point d'entrée au Canada 440	Air way/Bill of lading No. / N° de connaissement	
** Please note that commodities requiring ISC release must be cleared by CFIA at first point of entry before moving inland or to an inland CBSA bonded warehouse. ** Prenez note que les produits nécessitant l'approbation de mainlevée du CSI doivent être autorisé par l'ACIA avant de quitter le premier point d'entrée au Canada et/ou avant de se diriger vers un entrepôt sous-douanes.			
COMMENTS / COMMENTAIRES F-F-12086-07955623-9-N, 1521447, 1522132 DRC #122			
METHOD OF PAYMENT / MÉTHODE DE PAIEMENT		<div style="border: 1px solid black; padding: 10px; text-align: center;"> <h2 style="margin: 0;">EDI</h2> <div style="display: flex; justify-content: space-around; align-items: center;"> <div> Canadian Food Inspection Agency Agence canadienne d'inspection des aliments </div> </div> <p style="margin-top: 10px;">National Import Service Centre 4:36 pm, Jan 01, 2019 Centre de service national à l'importation</p> <p style="margin-top: 10px;">Sceau et signature de l'inspecteur</p> </div>	
Name of the Payer / Nom du payeur Loblaws			
CFIA client account number / N° de compte client de l'ACIA 10003565			
For other method of payment, contact ISC Pour toute autre mode de paiement, contacter le CSI			

Information may be accessible or protected as required under the provisions of the Access to Information Act

Les renseignements peuvent être accessibles ou protégés selon ce que prescrit la Loi sur l'accès à l'information.

CONFIRMATION OF SALE





CONFIRMATION DE VENTE

Page 1 of 1

1. Vendor (Name and Address) / Vendeur (Nom et adresse) Alpine Fresh Inc. 8300 NW 58 Street Suite 201, Miami, FL 33178				2. Purchaser (Name and Address) / Acheteur (Nom et adresse) LOBLAW COMPANIES (BILLING) 1 PRESIDENT'S CHOICE CIRCLE BRAMPTON, ON L6Y 5S5			
3. Exporter (Name and Address) / Exportateur (Nom et adresse) (SAME AS ABOVE)				4. Consignee (Name and Address) / Destinataire (Nom et adresse) LOBLAW CAMBRIDGE / MAPLEGROVE 1185 FOUNTAIN STREET NORTH, CAMBRIDGE N3H 4R7			
5a. Carrier (Name and Address) / Transporteur (Nom et adresse)				5b. Place of Direct Shipment to Canada / Point d'expédition directe vers le Canada CAMBRIDGE, ON N3H 4R7			
5c. Conveyance Identification No. N° d'immatriculation du véhicule				5d. Date of Direct Shipment to Canada Date d'expédition directe vers le Canada Year/Année Month/Mois Day/Jour 1 8 1 2 3 1		5e. Date Purchased / Date de l'achat Year/Année Month/Mois Day/Jour 1 8 1 2 2 7	
6a. Transportation: Olive mode (Type, routing and travel temperature) Transport: Préciser le mode (Type, itinéraire et la température) Air Freight				7. Country of Transshipment / Pays de transbordement USA		9. Sale Made / Modalité de vente <input checked="" type="checkbox"/> FOB FAB <input type="checkbox"/> delivered à la livraison	
8. Check how sold Cocher le type de vente <input checked="" type="checkbox"/> telephone téléphone <input type="checkbox"/> letter lettre <input type="checkbox"/> telex télégramme <input type="checkbox"/> in person en personne <input type="checkbox"/> other autre				10. Currency of Settlement Devise du paiement U.S. Dollars			
11. Harmonized System Tarif item N° tarifaire du système harmonisé	12. Specification of Commodities (General description and characteristics. Le grade, quality, kind of packaging, marks and numbers)	Désignation des produits (description générale et caractéristiques, p. ex. catégorie, qualité nature des cote, marques et numéros)	13. Country of Origin by commodity. If U.S. declare state, Pays d'origine per produit. Si E-U, indiquer l'état	14. Net Weight (state unit per pkg. by commodity in kg or pounds) Poids net (préciser en unité par colis per produit en kg ou lb)	15. No. of Pkgs by commodity N° de colis par produit	Billing Price of Commodity Prix de vente du produit	
						16. Price per pkg Prix par colis	17. Total cost per commodity Coût total par produit
81040 81040	Blueberries Alpina 18OZX8. Blueberries Alpina 6OZX12. Recorders SB TEMP.	CL CL		9.00lbs 4.50lbs 1.00lbs	1,080 480 1	28.00 16.75 0.00	30,240.00 8,040.00 0.00
18. Purchaser's Order No. N° de commande de l'acheteur 2001749448		19. Commercial Invoice No. N° de la facture commerciale 2300188		20. Total weight / Poids total 11,880lbs Gross/Brut 12,380lbs		21. Total cost all commodities Coût total tous produits 38,280.00	
22. Special Agreements and related expenses (eg. transport, loading, palletization, inspection, weighing, temperature recorder, etc.) Ententes spéciales et autres dépenses (p.ex. transport, refroidissement, mise en palette, inspection, pesée, relevé de température, etc.)							
23. Date of Delivery if delivered sale Date d'arrivée si vente à la livraison Year/Année Month/Mois Day/Jour 1 8 1 2 3 1				24. Invoice amount Préciser le montant		25. Included in field 21 Compris dans le total à la zone 21	
26. Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada						<input checked="" type="checkbox"/> N/A	
27. Transportation charges, expenses and insurance to the place of direct shipment to Canada Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada						<input checked="" type="checkbox"/> N/A	
28. CROSS-OVER DECLARATION (If Applicable) / DÉCLARATION DE TRANSPORT (s'il y a lieu) For the purpose of the above transaction, I am crossing from a Conformément à ce qui est susmentionné, je transfère mes activités de				29. Broker to Exporter / Courtier à marchand Dealer to Broker / Marchand à courtier (Signature) 12/28/2018			
27. Purchaser or Agent / Acheteur ou agent Signature & date Representing: Agissant pour:				Vendor or Agent / Vendeur ou agent Signature & date Representing: Agissant pour: Alpine Fresh, Inc.			
The signer hereby certifies that the signer is authorized by the purchaser or the vendor named above to sign and authenticate the same on the purchaser's or vendor's behalf. It is understood, unless otherwise stated herein, that this sale is made in contemplation of and subject to, and that all items described hereby are found, at shipping point to be in conformity with, the Canada Agricultural Products Act, the Canadian Food and Drugs Act, the Plant Quarantine Act and their respective regulations.				Le signataire certifie qu'il est autorisé par l'acheteur ou le vendeur susmentionné, à authentifier le présent document au nom de celui-ci. Il est entendu, sauf sur indication contraire que la vente est soumise au, et tous les articles décrits par le présent se trouvent, au point de production, en conformité avec la Loi sur les produits agricoles au Canada, la Loi sur les aliments et drogues canadienne, la Loi sur la quarantaine des plantes et leur règlement respectif.			

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 valid OMB control number. The valid OMB control numbers for this information collection are 0579-0021 and 0094. The time required to complete this information collection is estimated to average 0.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0021
and 0094

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE PLANT PROTECTION AND QUARANTINE PHYTOSANITARY CERTIFICATE FOR REEXPORT		FOR OFFICIAL USE ONLY PLACE OF ISSUE Miami, Florida NO. F-F-12086-07955623-9-N			
TO: THE PLANT PROTECTION ORGANIZATION(S) OF Canada					
CERTIFICATION					
This is to certify that the plants or plant products described below were imported into the United States from (Country of origin) <u>Chile</u> covered by Phytosanitary Certificate <u>1522132</u> <u>1521447</u> original <input checked="" type="checkbox"/> certified true copy of which is attached to this certificate. That they are <input type="checkbox"/> packed <input checked="" type="checkbox"/> repacked <input type="checkbox"/> in original <input checked="" type="checkbox"/> in new containers, that based on the original Phytosanitary Certificate <input checked="" type="checkbox"/> and additional inspection, they are considered to conform with the current phytosanitary regulations of the importing country, and that during storage in the United States, the consignment has not been subjected to the risk of infestation or infection.					
DISINFESTATION AND/OR DISINFECTION TREATMENT					
1. DATE (1) December 26, 2018		2. TREATMENT Fumigation			
3. CHEMICAL (active ingredient) Methyl bromide		4. DURATION AND TEMPERATURE 3 Hours 40 °F			
5. CONCENTRATION 4 pounds / 1000 ft		6. ADDITIONAL INFORMATION			
DESCRIPTION OF THE CONSIGNMENT					
7. NAME AND ADDRESS OF EXPORTER Alpine Fresh, Inc 9300 NW 58th Street suite 201 Doral, Florida 33178			8. DECLARED NAME AND ADDRESS OF THE CONSIGNEE Loblaw Cambridge 1105 Fountain Street North Cambridge, Ontario N3H 4R7 Canada		
9. NAME OF PRODUCE AND QUANTITY DECLARED (1) 1560 Boxes Blueberry (Fruit)			10. BOTANICAL NAME OF PLANTS (1) Vaccinium corymbosum		
11. NUMBER AND DESCRIPTION OF PACKAGES (1) 1560 BOXES			12. DISTINGUISHING MARKS (1) None		
13. PLACE OF ORIGIN (1) Chile			14. DECLARED MEANS OF CONVEYANCE Truck Line 15. DECLARED POINT OF ENTRY CANADA		
WARNING: Any alteration, forgery, or unauthorized use of this phytosanitary certificate is subject to civil penalties of up to \$250,000 (7 U.S.C. Section 7734(b)) or punishable by a fine of not more than \$10,000, or imprisonment of not more than 5 years, or both (18 U.S.C. Section 1001).					
ADDITIONAL DECLARATION					
 					
Page 1 of 1					
16. DATE ISSUED December 28, 2018		17. NAME OF AUTHORIZED OFFICER (Type or Print) Haylett Cruz-Escoto		18. SIGNATURE OF AUTHORIZED OFFICER 	
No liability shall attach to the USDA or to any officer or representative of the USDA with respect to this certificate.					



CERTIFICADO FITOSANITARIO PHYTOSANITARY CERTIFICATE

SERVICIO AGRICOLA Y GANADERO
ORGANIZACION DE PROTECCION FITOSANITARIA DE CHILE
PLANT PROTECTION ORGANIZATION OF CHILE

Nº 1521447

1. A: ORGANIZACION (ES) DE PROTECCION FITOSANITARIA DE / To: Plant Protection Organization (s) of

ESTADOS UNIDOS

DESCRIPCION DEL ENVIO / DESCRIPTION OF CONSIGNMENT		
2. NOMBRE Y DIRECCION DEL EXPEDIENTE (S) / Name and address of Exporter COMERCIALIZADORA Y EXPORTADORA SAATCHI & SAATCHI S.A. CAROL BUNNEY N° 470, OFICINA 73, CHILLAN		3. NOMBRE Y DIRECCION DEL DESTINATARIO (S) / Recipient name and address of ALPINE TREES, 3300 NORTH WEST 84 ST, DOTAL FLORIDA 33176, USA
4. NOMBRE Y DESCRIPCION DE LOS PRODUCTOS / Name and description of products 3400, Cajas	5. NOMBRE DEL PRODUCTO Y CANTIDAD DECLARADA / Name of product and declared quantity BACILLUS THURINGIENSIS, 1.000.000 UNIDADES	6. NOMBRE DEL PRODUCTO Y CANTIDAD DECLARADA / Name of product and declared quantity VACCINIUM SP.
7. MEDIO DE TRANSPORTE DECLARADO / Declared means of transport KIMBA	8. LUGAR DE ORIGEN / Place of origin VII REGION: LINDERA VIII REGION: RIO BIO IXVI REGION: DISQUELLEN, TUNILLA	9. PUNTO DE ENTRADA DECLARADO / Declared point of entry PORT EVERGLADES
10. MARCA DESTINATARIO / Consigning marks CONTAINER: 1521447-6; ALPINE TREES		

ORIGINAL

11. Por la presente se declara que los productos vegetales o animales originarios de Chile que se han importado en conformidad con las disposiciones sanitarias y se declara que están libres de plagas cuarentenarias especificadas por la parte correspondiente importadora y que cumplen los requisitos sanitarios exigidos en la parte correspondiente importadora, inclusive los relativos a las plagas de cuarentena especificadas.

THE undersigned hereby declares that the plants, products vegetable or animal originating in Chile have been imported in conformity with the sanitary provisions and are free from quarantine pests specified by the importing contracting party and in conformity with the current phytosanitary provisions of the importing contracting party, including those for regulated non-quarantine pests.

DECLARACION ADICIONAL / ADDITIONAL DECLARATION

BACILLUS THURINGIENSIS "THE CONSIGNMENT HAS PRODUCED IN A PEST-FREE AREA FOR HENFLE, CHATITIS GUAYTAN"

"THE PACKAGING SATISFIES USDA/APHIS QUARANTINE TREATMENT REQUIREMENTS"

USDA-APHIS-PPQ
Miami, Florida

TRATAMIENTO DE DESINFESTACION / DISINFESTATION AND / TREATMENT		
12. FECHA / Date XXXX	13. TRATAMIENTO / Treatment XXXX	14. DUREZA Y TEMPERATURA / Hardness and temperature XXXX
15. PRODUCTO (s) usado (s) / Product (s) used XXXX	16. CONCENTRACION / Concentration XXXX	17. INFORMACION ADICIONAL / Additional information XXXX

1120899



TIMBRE DE LA ORGANIZACION / Stamp of Organization

18. NOMBRE OFICIAL AUTORIZADO (S) / Name of authorized official CAROLINA ARIAS CONTRERAS		19. LUGAR DE EMISION / Place of issue PUERTO TALCAHUANO
20. FECHA / Date 10/12/2018		

• EL SERVICIO AGRICOLA Y GANADERO, sus funcionarios y representantes, declinan toda responsabilidad por el uso indebido de este certificado. / The Agrarian Service and its representatives, disavow any responsibility for the misuse of this certificate.

• Cualquier adulteración o uso indebido de este certificado es sancionado por la ley. / Any adulteration and for unauthorized use of this document is sanctioned by law.



CERTIFICADO FITOSANITARIO PHYTOSANITARY CERTIFICATE

SERVICIO AGRICOLA Y GANADERO
ORGANIZACION N. FLOREACION FITOSANITARIA DE CHILE
PLANT PROTECTION ORGANIZATION OF CHILE

Nº 1522132

UNIVERSIDAD

A. ORGANIZACION (LS) DE PROTECCION FITOSANITARIA DE / Plant Protection Organization of
ESTADOS UNIDOS

DESCRIPCION DEL ENVIO / DESCRIPTION OF CONSIGNMENT

<p>1. Nombre y dirección del remitente (plantation name and address)</p> <p>ALIMENTOS Y FRUTOS S.A., LO BOCHER 230 QUILICUA BAILEADO</p>		<p>2. Nombre y dirección del destinatario (recipient name and address)</p> <p>ALPINE FRESH, 9300 N.W. 50TH STREET, SUITE 201 DORAL, FL. 33118 USA</p>
<p>3. Nombre y descripción de la mercancía (name and description of goods)</p> <p>4716, CAJAS</p>	<p>4. Nombre y descripción de la mercancía (name and description of goods)</p> <p>ABUNDANCIA FRESCOS, 1200000 NETOS</p>	<p>5. Nombre y descripción de la mercancía (name and description of goods)</p> <p>VACCINIUM SP.</p>
<p>6. Nombre y descripción de la mercancía (name and description of goods)</p> <p>LEONARD</p>	<p>7. Nombre y descripción de la mercancía (name and description of goods)</p> <p>VII REGION: LINARES, CAUQUENES XVI REGION: DIGNILLIN, PUNILLA, ITATA</p>	<p>8. Nombre y descripción de la mercancía (name and description of goods)</p> <p>PORT EVERGLADES</p>
<p>9. Nombre y descripción de la mercancía (name and description of goods)</p> <p>CONTAINER: 100U123000-9</p>		

DECLARACION ADICIONAL / ADDITIONAL DECLARATION

ABUNDANCIA FRESCOS "THE CONSIGNMENT WAS PRODUCED IN A TEST-FREE AREA FOR MONKEY, CEBUSITTA CAPITATA"
"THE PACKAGING SATISFIES USDA/APHIS QUARANTINE TREATMENT REQUIREMENTS"

USDA-APHIS-PPQ

TRATAMIENTO DE DEBINFESTACION / DEINFESTATION AND

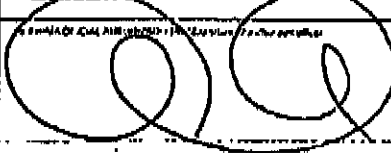
Miami, Florida

1. Nombre y dirección del remitente (plantation name and address)	2. Nombre y dirección del destinatario (recipient name and address)
3. Nombre y descripción de la mercancía (name and description of goods)	4. Nombre y descripción de la mercancía (name and description of goods)
5. Nombre y descripción de la mercancía (name and description of goods)	6. Nombre y descripción de la mercancía (name and description of goods)
7. Nombre y descripción de la mercancía (name and description of goods)	8. Nombre y descripción de la mercancía (name and description of goods)

1111802



CAROLINA AMERICA CONTRERAS-BAER



PUERTO TALCAHUANO

11/12/2018

1. The undersigned hereby certifies that the above described goods have been produced in a test-free area for monkey, Cebusitita capitata, and that the packaging satisfies USDA/APHIS quarantine treatment requirements.