

¹STATEMENT FOR THE TRANSFER OF EXPORT BEE PRODUCTS BETWEEN EXPORT PREMISES

Consignor name (<i>coming from</i>):	Consignee name: New Zealand Beeswax Ltd
RMP identifier code:	RMP identifier code: 5BW
Transport identifier code:	

Consignment details

Description of Goods	Quantity & Package Type	Identified as (code number)	Processing Dates	Net Weight

- | | | |
|---|--------------------------|--------------------------|
| The bee product described herein; | Yes | No |
| (a) Meets the requirements of the "Apiarist and Beekeeper Statement for the Harvest of Honey and other Bee Products for Human Consumption" | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) In the case of honey: | | |
| (i) meets the requirements of one or more of options 2-6 of the Food (Tutin in Honey) Standard 2008, | <input type="checkbox"/> | <input type="checkbox"/> |
| (ii) has been sampled and tested to meet the requirements of the Food (Tutin in Honey) Standard 2008 and is compliant with the relevant tutin limit | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Is suitable for human consumption | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) Is of New Zealand origin | <input type="checkbox"/> | <input type="checkbox"/> |
| (e) Has always been processed, stored or handled within a registered risk management programme under the Animal Products Act 1999 | <input type="checkbox"/> | <input type="checkbox"/> |
| (f) Meets the requirements of, and is eligible for export to the European Union | <input type="checkbox"/> | <input type="checkbox"/> |
| (g) Is eligible for the countries listed below (meets requirements as notified by way of OMAR): | | |

Additional required declarations here (example: PDB statement, eligible countries)².

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Source Documents e.g. Statement for Transfer, or Eligibility Document	RMP	Date

If you have answered "No" to any statements (a) to (f) provide further details for affected product, where required (including the product name, date, and code).

I declare that all the statements made in this document are true and correct. I am aware that the details provided will be received and retained by the processor and may be provided to the New Zealand Food Safety Authority for the general administration of the Animal Products Act 1999. I consent to that happening.

RMP Operator Signature: _____ Date: ___/___/___

RMP Operator Name: _____

Note: It is an offence under section 127 of the Animal Products Act 1999 to provide false or misleading information in this transfer statement and under the Privacy Act 1993 you have certain rights of access to and correction of personal information held about you.

¹ The consignor must send the original signed paper transfer document to the consignee. The consignee must hold the original transfer statement on file.

² Where for the purposes of compliance with the Food (Tutin in Honey) Standard 2008, the apiarist(s) or beekeeper(s) operate primary processing RMPs or FSPs, enter the primary processing RMP/FSP identifiers in this box.