

Ref No: APEDA/PFD/LT/

NOTICE

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कृषि और प्रसंस्कृत खाद्य उत्पाद निर्यात विकास प्राधिकरण (वाणिज्य एवं उद्योग मंत्रालय, भारत सरकार)

Agricultural and Processed Food Products
Export Development Authority
(Ministry of Commerce & Industry, Govt. of India)

Dated: 25th April, 2016

Reimbursement of sample testing charges for groundnut exports

Under the component of Quality Development under the Agricultural Export Promotion Plan scheme of APEDA for products for which Residue Monitoring Plan (RMP) is in place, exporters are eligible for reimbursement of sample testing charges.

Reimbursement of 50% of the total cost subject to a ceiling of Rs 5000/-per sample is applicable under the scheme.

It has been decided to extend this facility to exporters of groundnuts w.e.f. 1st April, 2016. No in principle approval is required for applying for reimbursement of sample testing expenses.

Exporters will have to follow the procedure laid down in Addendum IX to APEDA Trade Notice No: APEDA/PPP/Q/2011 dated 27.6.2011.

Since XII Five Year Plan period will be over on 31.03.2017, the applicability and reimbursement of expenses will be subject to Government's approval of APEDA scheme for the XIII Plan period.

Along with application exporters will have to upload bill of lading and the linkage sheet duly authenticated by the Chartered Accountant (sample attached).

One application will take only 100 sample on the software. Hence applications by an exporter will be submitted in multiples of 100 samples .

Eligible amount of reimbursement will be credited to Exporters' account by APEDA through NEFT/RTGS.

(Sunil Kumar)
Director

Dated: 25th April, 2016

LINKAGE SHEET

Consolidate Statement of Farm registration no/Invoice Contains details of Payment/Phyto no./Container no. & Test Reports

| Container no. | | | | |
|--|---|---|--|---|
| Phytosanitary Container certificate no. no. & Date/Health Certificate NO and Date/ | | | | |
| Laboratory Payment | Test Report Result | | | |
| | Laboratory Certificate /Test Report no. | A | | |
| | Cheque /DDno. & Date/onlin e payment details | | | |
| | Net Amount | | | |
| | Amount | | | |
| | Bill | | | 5 |
| | Name of Laboratory (Registered Laboratory of APEDA) | | | |
| S. No. Invoice No. & Date | | | | |
| S. No. | | | | |