**DECLARATION of payment of inspection fees**

The Hungarian competent authority shall take samples of traditional and organic/transitional products (intended use: food) from third countries for laboratory testing, as provided for in European Union legislation. The release for free circulation (entry into free circulation) of the product on the common market is subject to the availability of laboratory test results demonstrating compliance with the legal limits.

As the contractor/legal representative responsible for the consignment, I hereby undertake to pay the fee charged under Regulation (EU) 2017/625.

***Signed:***

\* Name of the cost-bearing undertaking: …………………………………............................................

\* Cost bearer's registered office::………………………………………………………………………

\* Cost bearer's telephone number: ………………………………………………...…………………...

\* E-mail address of the cost bearer: …………………………………………………………………...

\* Tax number of the cost bearer:…………………………...…………………………………………..

\*Cost bearer's bank account number:…………………………………………………………………

 Cost bearer IBAN:……………………………………………………………………………………

 Cost bearer SWIFT Code:……………………………………………………………………………

\*Name of the representative (countersigning officer) of the cost bearer: …………………………………………………………………………………………………………

\*Assignment of the representative of the cost bearer:………………………………………………..

\*The address of the representative of the cost bearer:…………………………………………………

\*Contact details (e-mail and telephone number) of the representative of the cost bearer: ………………………………………………………………………………………………….

I declare that I am aware of my criminal liability and certify by my signature that the information I have provided is true and correct.

My declaration above

[ ] applies only to the following consignment:: CHED No:………………………….

 COI No:…………………………………

[ ] valide until revoked.

Date:

Signature:

*\*Mandatory field (If the declaration submitted is incomplete, the testing laboratory will not issue the test result until the missing data are received.)*