



INFORMATION ABOUT FDA DETENTIONS

Thank you for your inquiry regarding the testing of your product which is currently on FDA detention. As you know, Certified Laboratories is the country's premier third party testing laboratory with regards to clearing FDA detained food entries. With our many years of experience dealing with every FDA district in the country, you can be assured that Certified Laboratories will be able to provide the services necessary to clear your entry with the utmost care and timeliness.

As a reminder to get started, send the following items for our review:

- Notice of FDA Action (see example below)
- Packing list
- Commercial invoice
- Warehouse inventory receipt or receiving tally
- Completed Intake Form
- Completed Product Location Form

These documents can be sent via email to Ken Cusack at: KCusack@Certified-Laboratories.com or faxed to 631-396-0983. After review, we will get back to you with a price quote and turnaround time for sampling and testing.

If you have any further questions regarding the process, do not hesitate to call so we may discuss them.

Best regards,

Ken Cusack
Senior Import Manager

East Coast:

65 Marcus Drive
Melville, NY 11747
800-CERT-LAB
516-576-1400

Southern CA:

6460 Dale Street
Buena Park, CA 90621
888-FOOD-LAB
714-562-8622

Northern CA & CFSC:

3241 Liberty Square Pkwy.
Turlock, CA 95380
866-915-LAB3
209-664-1100

Midwest:

175 E. Crossroads Pkwy, Ste. F
Bolingbrook, IL 60440
855-CLMW-LAB
630-783-8600

United States Food and Drug Administration

New York District Office

Notice of FDA Action

Entry Number:

Notice Number: 2

December 17, 2009

Filer:

Attention:

Broker Box:

Port of Entry: 4601, Newark, NJ

Carrier:

Date Received: December 14, 2009

Arrival Date: December 14, 2009

Importer of Record:

Consignee:

INFORMATION ONLY

HOLD DESIGNATED

Summary of Current Status of Individual Lines

Line ACS/FDA	Product Description	Quantity	Current Status
* 001/001	FROZEN P & D SHRIMP	1050 CT	Detained 12-17-2009

* = Status change since the previous notice. Read carefully the sections which follow for important information regarding these lines.

@ = Consignee ID

FDA will not request redelivery for examination or sampling, if the products not released by FDA are moved, following USCS conditional release to a location within the metropolitan area or to a location approved by the FDA office at the number below.

All products in this entry not listed above may proceed without FDA examination. This notice does not constitute assurance the products involved comply with provisions of the Food, Drug, and Cosmetic Act or other related acts, and does not preclude action should the products later be found violative.

INFORMATION ONLY

DETENTION WITHOUT EXAMINATION

The following products are subject to refusal pursuant to the Federal Food Drug and Cosmetic Act (FD&CA), Public Health Service Act (PHSA), or other related acts in that they appear to be adulterated, misbranded or otherwise in violation as indicated below:

Entry Number:

Page: 2

Line ACS/FDA	Product Description	Respond By
001/001	FROZEN P & D SHRIMP	January 8, 2010

FD&CA Section 402(a)(1), 801(a)(3); ADULTERATION

The article appears to contain Salmonella, a poisonous and deleterious substance which may render it injurious to health. See FDA Import Alert No. 16-81 (WWW.FDA.GOV). You may submit evidence that the product is in compliance, such as a private lab analysis. PLEASE RESPOND WITHIN THE SPECIFIED TIME FRAME WITH YOUR INTENT OR THIS SHIPMENT WILL BE REFUSED.

Please direct your response to:

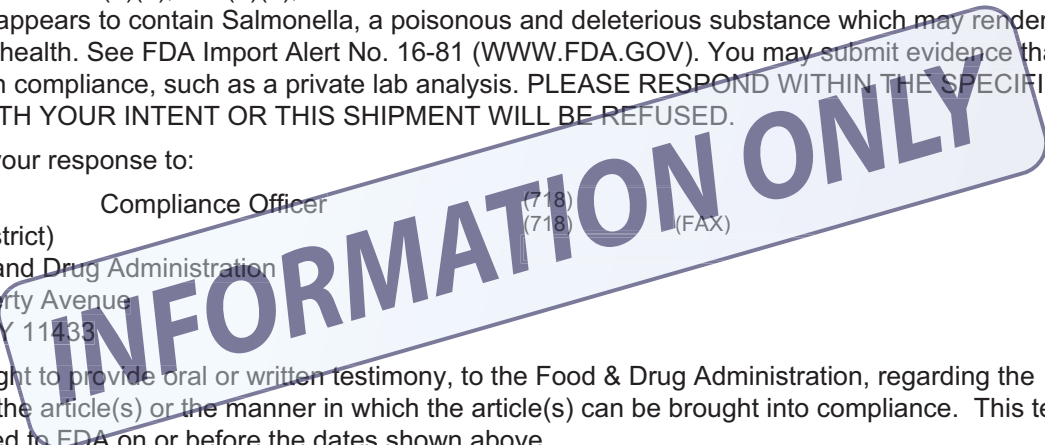
Compliance Officer (718) _____ (718) _____ (FAX)

(Region/District)

U.S. Food and Drug Administration

158-15 Liberty Avenue

Jamaica, NY 11433



You have the right to provide oral or written testimony, to the Food & Drug Administration, regarding the admissibility of the article(s) or the manner in which the article(s) can be brought into compliance. This testimony must be provided to FDA on or before the dates shown above.

Notice Prepared For: The District Director, U.S. Food and Drug Administration
 Notice Prepared By:



NEW CLIENT INTAKE FORM

DATE:

COMPANY NAME:

PRIMARY CONTACT:
(First & Last Name)

E-MAIL ADDRESS:

ALTERNATE CONTACT:
(First & Last Name)

E-MAIL ADDRESS:

STREET 1:

STREET 2: (PO BOX)

STREET 3: (SUITE/ROOM #)

CITY:

STATE:

ZIP CODE:

COUNTRY:

COUNTRY CODE:

TELEPHONE #:

EXT:

FAX #:

CELL #:

ACCOUNTS PAYABLE
CONTACT:
(First & Last Name)

E-MAIL ADDRESS:

TELEPHONE#:

EXT:

FAX:

FOR INTERNAL USE ONLY

Customer Category:

East Coast:
65 Marcus Drive
Melville, NY 11747
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516-576-1400

Southern CA:
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Bolingbrook, IL 60440
855-CLMW-LAB
630-783-8600



PRODUCT LOCATION

PRODUCT:

LOT NUMBERS:

WAREHOUSE NAME:

CONTACT NAME:

TELEPHONE #:

EXT:

CONTACT NAME:

TELEPHONE #:

EXT:

WAREHOUSE ADDRESS:

CITY:

STATE:

ZIP CODE:

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