



Section 1: Consignee's Information			
Consignee's Name			
Address			
Contact Person			
E-mail Address			
Telephone Number(s)		Fax Number	
Section 2: Shipment Details			
Declarant/Broker No.		Customs Ref. No.	
Declarant Ref. No.			
Port of Entry		Arrival Date	
Marks & Nos.			
Section 3: Product Description			
No.	Name of Product(s)	Brand Name(s)	Quantity
1.			
2.			
3.			
4.			
5.			

Signature of Consignee/Broker: _____ Date: _____

FOR OFFICIAL USE ONLY

Section 4: Payment	
Non-refundable Application Fee included: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> To be Invoiced	Application Fee:
	Receipt No.:
Inspector's Comments:	
Inspector's Signature:	Date: