

## **DEPARTMENT:** CUSTOMS & EXCISE

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NamRA-CE-FR-066

## **SAD 500 - CUSTOMS DECLARATION FORM**

1																	
1 2 3	2. EXPOR	TER/C	ONSIGNOR	TIN	1. DECLARATION		OFFIC	A. OFFICE OF DESTINATION OR DEPART OFFICE CODE MANIFEST NUMBER				TURE					
4				BSIC	BSIC				-								
5 6 7 8				50.0				3. FORMS 4.		REGIS	REGISTRATION NO.			ASSESSMENT NO AND DATE			
9																	
	8. IMPORTER/CONSIGNEE			TIN	TIN			5. ITEMS 6. 7			7. DECLARANT REFERENCE		E NO.	RECEIPT NO.	& DATE		
				BSIC	BSIC			10.	11.	12.	13.		13A Inv	oice No. and	Date	ļ	
G																	
E N	14. DECL	ARANT	/AGENT						17								
E				TIN	TIN				COE COO COD								
R A					20. DELIVERY TERMS								I				
Ĺ	18. IDENT	IFICAT	ION, DATE ANI	D NATIONALITY C	22. CU	22. CURRENCY AND TOTAL VALUE 23. RATE OF EXCHANG						NGE					
S																	
E	21 IDENT	IFICAT	ION DATE AN	D NATIONALITY O	ATIONAL ITY OF			28.			24 OTHER CO.		STS DETAILS			1	
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M E											FRE	IGHT					
N	25. 26 TMF TI					27.						INCUDANCE					
Т	00			120	I.a.						INSURANCE						
	29. OOE			30.	30.						OTHER COST						
31. PACKAGES									32	2. ITEM N	10. 33. CC	OMMODITY	CODE				
AND DESCRIPTION	MARKS A NUMBERS																
OF GOODS	NUMBER		<u> </u>				34. COC 35. GROSS MASS (KGS) ERENCE					١.					
	TYPE OF PACKAGE	ES														l T	
	CONTAINER										37. CPC 38. NET MASS (KGS) 39. QUOTA (KGS)						
	NUMBERS DESCRIPTION																
	DESCRIP	IION					40. SUMMARY DECLARATION / PREVIOUS DOC										
								41. SL	41. SUPP. UNITS 42. CUSTOMS VALUE			ALUE 43.V.M	E G				
													(FCY)			M	
44. ADDITIONAL INFORMATION/	LICENCE NUMBER DEDUCTED VALUE DEDUCTED QUANTITY											EX WAREHOUSE CODE 45.					
PRODUCED																	
47. CALCULATION OF DUTIES AND TAXES	REMOVA	L IN BC	OND (R.I.B.) & D	DATE	=			E CO	DE				46.	STATISTICA	L VALUE		
	TYPE	DU	TY/TAX BASE	RATE	AMOUNT	MP	48. AC	COUN	T CODE			49. IDENT	IFICATION	N OF WAREH	OUSE/TIME LIMIT		
																-	
								SUM			MARY OF TOTAL DUT			IES AND TAXES			
								TOTAL DUTIES & TAX			XES						
							GUARANTEE A			E AMOU	AMOUNT						
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	TOTAL			<b>→</b>	<b>-</b>			TOTAL PAY			YABLE						
	DECL 1	<u> </u>															
	DECLA	KAII		the	undersigned of				FOI	FOR OFFICIAL USE							
	being the (agent) hereby declare that																
	true and																
	u ue anu																
	Signature	9		I.D nu	I.D number			Date									
	g Date																