

EXCISE ACCOUNT		TOBACCO PRODUCTS (SOS) - SPECIAL STORAGE WAREHOUSE						DA 260				
LICENSED WAREHOUSE NAME >>>> PHYSICAL ADDRESS >>>> >>>> >>>> >>>>						WAREHOUSE NUMBER >>>> EXCISE CLIENT CODE >>>> YEAR & MONTH(S) >>>> FROM DATE >>>> TO DATE >>>>						
PRODUCT CODE		CTOB		PTOB		PTOB		CIGS		CGAR		
TARIFF ITEM(S)		104.35.05	104.35.07	104.35.01	104.35.02	104.35.03	104.35.09	104.30.07	104.30.15	104.30.03	104.30.11	
STATISTICAL UNIT		KG		KG NET		KG NET		CIGARETTES		KG NET		
Opening Balance												
Plus	Receipts From C&E Warehouses	DA 260.02										
=	SUBTOTAL											
Less	Non-Duty Paid Removals	DA 260.04										
=	Closing Balance											
DECLARATION		DRAFT										
I (Name & Surname) _____												
IN MY CAPACITY AS _____												
FOR (Licensee Name) _____												
HEREBY DECLARE THAT ALL INFORMATION SUPPLIED ON THIS DOCUMENT IS TRUE AND CORRECT.												
SIGNATURE _____		DATE _____		FOR OFFICIAL USE ONLY								
CONSOLIDATED			ASSURANCE ACTIVITY		NAME		SIGNATURE		DATE		DATE RECEIVED	
Code	Number	Date	Accepted								(OFFICIAL DATE STAMP AND SIGNATURE)	
			Face Checked									
			Compliance Checked									

