

**SOUTH AFRICAN REVENUE SERVICE**

**Government Gazette 25828  
NO. R.1796**

**2003-12-12**

**CUSTOMS AND EXCISE ACT, 1964  
AMENDMENT OF RULES (NO. DAR/84)**

Under sections 21, 59A, 60 and 120 of the Customs and Excise Act, 1964, the rules published in Government Notice R. 1874 of 8 December 1995 are amended to the extent set out in the Schedule hereto with effect from 1 January 2004

**P J GORDHAN  
COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE**

**SCHEDULE**

Item 202 00 of the Schedule to the rules is hereby amended –

- (a) By the insertion in item 202 00 of the Schedule to the rules of the following forms:
- "DA 46A2 01 Exporter's Application for Registration for the purposes of the GSP;
  - DA 46A2 02 Producer's Application for Registration for the purposes of the GSP;
  - DA 46A2 03 Application for Certificate of Origin Form A and Declaration by the Exporter;
  - DA 46A2 04 Declaration by Producer;
  - Annexure DA 185 14 Client Type 14 – Producer for Generalized System of Preferences (GSP) "
- (b) By the substitution for forms DA 49A 02, DA 185 and DA 185 02 of the following forms:
- "DA 49A 02 Application for Approved Exporter;
  - DA 185 Application Form: Licensing / Registration of Customs and Excise Clients;
  - Annexure DA 185 02 Client Type 2 – Exporter."



**APPLICATION FORM: LICENSING/REGISTRATION OF CUSTOMS AND EXCISE CLIENTS**

For official use 

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**NOTES FOR THE COMPLETION OF FORM**

- 1 Please indicate with an "X" in the applicable box
- 2 If the space provided on form DA185 and applicable annexure(s) is insufficient, the information must be furnished on a separate page, which must be attached to the form DA185 and the annexures
- 3 Where the asterisk (\*) appears, delete which ever is not applicable
- 4 Please reflect the relevant customs and excise client number, customs and excise warehouse number or rebate user number when applying for the amendment of existing information or for a total cancellation per client type.
- 5 Please take note that a separate application form must be completed for each client type.
- 6 Please complete annexure DA185 A where security must be furnished.

**A.1. EXISTING REGISTRANT/LICENSEE PARTICULARS**

If currently registered/licensed with SARS, please state allocated customs code or client number. 

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**A.2. PURPOSE OF APPLICATION**

New Registration/Licensee or renewal:  Amendment of existing information:  Cancellation:

**A.3. CLIENT TYPES**

REGISTRATION		LICENSING	
1 Importer (Annexure 01) (Sec 59A)	<input type="checkbox"/>	6 Special Manufacturing Warehouse (Annexure 06) (Sec 21, 60 and 61)	<input type="checkbox"/>
2 Exporter	<input type="checkbox"/>	7 Manufacturing Warehouse (Annexure 07) (Sec 19A, 27, 60 and 61)	<input type="checkbox"/>
• Exporter – Annexure DA 185 02 (rule 59A 01)	<input type="checkbox"/>	8 Storage Warehouse (Annexure 08) (Sec 60 and 61)	<input type="checkbox"/>
• Exporter under AGOA – Annexure DA 185 02 & DA 46A1 03 (rules 59A.01 & 46A1.02)	<input type="checkbox"/>	9 Special Storage Warehouse (Annexure 09) (Sec 19A, 21, 60 and 61)	<input type="checkbox"/>
• Approved exporter for EC Agreement – Annexure DA 185 02 & DA 49A 02 (rules 59A 01 & 49A 18 (20))	<input type="checkbox"/>	10 Clearing Agent (Annexure 10) (Sec 64B)	<input type="checkbox"/>
• Exporter for GSP (various countries) – Annexure DA 185 02 & DA 46A2 01 (rules 59A 01 & 46A2 18)	<input type="checkbox"/>	11 Remover of goods in bond (Annexure 11) (Sec 64D)	<input type="checkbox"/>
3 Rebate (Annexure 03) (Sch 3, 4 and 6) (Sec 59A and 75)	<input type="checkbox"/>	12 Distributor of fuel (Annexure 13) (Sec 64F)	<input type="checkbox"/>
4 Manufacturer for AGOA (Annexure 04) (Sec 59A and Rule 46A1 03)	<input type="checkbox"/>		
5 Special Manufacturing Warehouse: MIDP (Annexure 05) (Sec 59A)	<input type="checkbox"/>		
13 Electronic communication with SARS (Annexure 12) (Sec 101A)	<input type="checkbox"/>		
14 Producer for GSP – Annexure DA 185 14 & DA 46A2 02 (rule 59A 01 & 46A2 18)	<input type="checkbox"/>		

**B. BUSINESS / PERSON PARTICULARS**

Registered name of business or name of applicant:																													
Business address: Street name and number:																													
Building name and floor number:																													
Suburb:																													
City/Town:	Street code:																												
Postal address:																													
Suburb:																													
City/Town:	Postal code:																												
Business Telephone and Fax numbers (Including code): <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																													
Business e-mail address:																													

C. NATURE OF BUSINESS											
Company	<input type="checkbox"/>	Close Corporation	<input type="checkbox"/>	Trust	<input type="checkbox"/>	Sole Proprietor	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Other	<input type="checkbox"/>
Company Registration number:											
Close Corporation Registration Number:											
Trust Registration Number:											
Other (Please specify):											

D. REGISTRATION PARTICULARS									
VAT Registration Number:					Income Tax Number:				
PAYE Number:					SDL Number:				
UIF Number:									

Full name, surname and ID/Passport number(s) of *Sole Proprietor and/* or all Partners/* Managing Director/* Financial Director/* Directors/* Members/* Trustees:											
i)	Initials:					Full Name:					
Surname:											
ID No:											
Passport No:											
ii)	Initials:					Full Name:					
Surname:											
ID No:											
Passport No:											
iii)	Initials:					Full Name:					
Surname:											
ID No:											
Passport No:											

E. CONTACT PERSON (Particulars of person who can be contacted regarding this application)											
Surname:											
First Name:											
Telephone Dialling Code:											
Cellular Phone Number:											
Capacity:											

F. ACCOUNTANT/ACCOUNTING DETAILS											
Name of Accountant/Accounting firm:											
Particulars of the Accountant/Auditor or Accounting Officer:											
Initials:						First Name:					
Surname:											
Telephone Dialling Code:											
Telephone Number:											
Business address: Street name and number:											
Building name and floor number:											
Suburb:											
City/Town:							Street code				
Postal address:											
Suburb:											
City/Town:							Postal code				

**G: INFORMATION REGARDING CONTRAVENTIONS AND OTHER MATTERS**

Please Indicate whether during the preceding five years, any person contemplated in the rules for section 59A or 60:-

Has contravened or failed to comply with the provisions of the Act	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
Has failed to comply with any condition, obligation or other requirement imposed by the Commissioner	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
Has been convicted of any offence under the Act	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
Has been convicted of any offence involving dishonesty	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
Has made any false or misleading statement in any material respect or omitted to state any material fact which was required to be stated in any application for registration or for any other purpose under the Act.	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
Has ever been insolvent or in liquidation	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>

If the answer is "yes" to any of the above questions In G full details must be furnished with the application

**CLIENT TYPE 2 – EXPORTER (INCLUDING EXPORTER FOR AGOA, APPROVED EXPORTER FOR EC AGREEMENT or EXPORTER FOR GENERALIZED SYSTEM OF PREFERENCES (GSP) (tariff preferences) granted by the COMMUNITY, NORWAY and SWITZERLAND)**

**Exporter Particulars:**

Please supply all trade names and physical addresses if the business is conducted from a different address or under a different name as was stated in paragraph B of the application form.

Trade name of business:			
Physical address: Street name and number: Building name and floor number: Suburb: City/Town: Street code:			

Clearance of Export: Self  Clearing Agent

Please indicate if also an exporter for AGOA. Yes  No

If indicated "yes" for exporter under AGOA please complete DA 46A1.02.

Please indicate if application is for approved exporter, EC agreement Yes  No

If indicated "yes" for approved exporter, EC Agreement, please complete DA 49A.02.

Please indicate if application is for GSP Yes  No

If indicated "yes" for GSP exporter, please complete form DA 46A2.01.

If indicated "yes" for GSP, please indicate the countries to which goods will be exported under GSP.

Country	Indicate with an "X"
**Community	
Norway	
Switzerland	

**Authority to apply:**

I/We \_\_\_\_\_ (name of applicant) herein represented by

(1) \_\_\_\_\_ Capacity \_\_\_\_\_

(2) \_\_\_\_\_ Capacity \_\_\_\_\_

being duly authorised thereto by virtue of -

(a) \* a resolution passed at a meeting of the Board of Directors held at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ ccoyy \_\_\_\_\_; or

(b) \* express consent in writing of all the members of the close corporation /\* partners of the partnership /\* trustees of the trust; or

(c) \* being a person having the management of any other association; or

(d) \* delegated officer of an organ of state,

hereby apply for registration as an exporter and/or \*exporter for AGOA.

**The under-mentioned original or certified copies must accompany the application:**

- (a) Registration certificate of business – As issued by the Registrar of Companies or Master of the Supreme Court in the case of a Trust
- (b) Resolution/consent or other authority as applicable
- (c) Identity/passport documents of
  - Individual
  - Partnership, Close Corporation and Trust – All Members/partners/trustees.
  - Company – All Directors, including Managing Director and Financial Director.

\*Delete which is not applicable  
 \*\*"EC Agreement" means Agreement on Trade, Development and Co-operation between the European Community and its Member States and the Republic of South Africa

**Declaration:**

I hereby-

- (a) declare that the particulars in the application and all enclosures are true and correct; and
- (b) undertake to-
  - (ii) inform the South African Revenue Service immediately of any changes in the particulars furnished in the application;
  - (i) comply with the customs and excise laws and procedures.

Initials and surname:		Status (e.g. Director):			
Signature:		Date:		Place	

**CLIENT TYPE 14 – PRODUCER FOR GENERALIZED SYSTEM OF PREFERENCES (GSP)**

<b>Producers Particulars:</b>	
Please supply all trade names and physical addresses if the business is conducted from a different address or under a different name as was stated in paragraph B of the application form.	
Trade name of business:	
Physical address: Street name and number:	
Building name and floor number:	
Suburb:	
City/Town:	
Street code:	

<b>Authority to apply:</b>
I/We _____ (name of applicant) herein represented by
(1) _____ Capacity _____
(2) _____ Capacity _____
being duly authorised thereto by virtue of -
(e) * a resolution passed at a meeting of the Board of Directors held at _____ on the _____ day of _____ ccyy _____; or
(f) * express consent in writing of all the members of the close corporation /* partners of the partnership /* trustees of the trust; or
(g) * being a person having the management of any other association; or
(h) * delegated officer of an organ of state,
hereby apply for registration as a producer for GSP / an exporter and/or *exporter for AGOA.

<b>The under-mentioned original or certified copies must accompany the application:</b>
(d) Registration certificate of business – As issued by the Registrar of Companies or Master of the Supreme Court in the case of a Trust
(e) Resolution/consent or other authority as applicable
(f) Identity/passport documents of
• Individual
• Partnership, Close Corporation and Trust – All Members/partners/trustees.
• Company – All Directors, including Managing Director and Financial Director.

<b>Declaration:</b>
I hereby-
(c) declare that the particulars in the application and all enclosures are true and correct; and
(d) undertake to-
(iii) inform the South African Revenue Service immediately of any changes in the particulars furnished in the application;
(ii) comply with the customs and excise laws and procedures

Initials and surname:		Status (e.g. Director):	
Signature:		Date:	
		Place	

<p align="center"><b>Generalized System of Preferences (GSP)</b> (as provided in the relevant enactments of the Community, Norway or Switzerland)</p>	<p align="center">DA 46A2.01</p>
<p align="center"><b>Exporter's Application for Registration for the purposes of the GSP</b> (in accordance with the requirements of section 46A(6) of the Customs and Excise Act, 91 of 1964 and the rules numbered 46A2)</p>	<p align="center"><b>Customs Client Number</b></p>
<p align="center"><b>Goods produced for export to the Community, Norway or Switzerland for the purposes of obtaining preferential tariff treatment as contemplated in the relevant enactments.</b></p>	
<p>Registered name: _____</p> <p>Trade name: _____</p> <p>Postal address: _____</p> <p align="right">Postal Code: _____</p> <p>Street address: _____</p> <p align="right">Postal Code: _____</p> <p>Magisterial District: _____</p> <p>Telephone number: (____) _____ Fax number: (____) _____</p>	
<p>I/we the undersigned undertake to –</p> <p>(a) maintain and keep complete books, accounts and other documents (as specified in rule 46A2 31) of the export of the covered articles, import documents and certificates of origin and other documents to prove the originating status of goods exported for 3 years from the date of export and make such books, accounts and other documents available at the request of any officer of the South African Revenue Service (SARS);</p> <p>(b) ensure compliance with the provisions of origin contained in the enactments contemplated in the rules numbered 46A2 governing the preferential treatment of goods exported to the Community, Norway or Switzerland;</p> <p>(c) cooperate with the SARS in providing documents, correspondence and reports relevant to any investigation, permit visits to and inspections at premises and agree to personal interviews to ascertain needed facts;</p> <p>(d) register with SARS before exportation of any articles for these purposes and de-register when exports cease;</p> <p>(e) ensure that I / we are fully conversant with the requirements of the relevant enactments as well as the provisions of the Customs and Excise Act and rules;</p> <p>(f) ensure the correctness of the information furnished on the certificate of origin Form A;</p> <p>(g) notify all persons in writing to whom a certificate of origin was given which I / we have reason to believe contains information that is not correct of any change which could affect its accuracy or validity</p> <p>_____ (Authorised signature) <span style="float:right">_____ (Date: YY/MM/DD)</span></p> <p>_____ (Name in block letters) <span style="float:right">_____ (Title)</span></p>	
<p><b>Note:</b> If the exporter is also the producer of the goods exported, form DA 46A.02 must also be completed</p>	



<p align="center"><b>Generalized System of Preferences (GSP)</b> (as provided in the relevant enactments of the Community, Norway or Switzerland)</p>	<p align="center">DA 46A2.02</p>
<p><b>Producer's Application for Registration for the purposes of the GSP</b> (in accordance with the requirements of section 46A(6) of the Customs and Excise Act, 91 of 1964 and the rules numbered 46A2)</p>	<p align="center"><b>Customs Client Number</b></p>
<p align="center"><b>Production of goods for export to the Community, Norway or Switzerland for the purposes of obtaining preferential tariff treatment as contemplated in the relevant enactments.</b></p>	
<p>Registered name: _____</p> <p>Trade name: _____</p> <p>Postal address: _____</p> <p align="right">Postal Code: _____</p> <p>Street address: _____</p> <p align="right">Postal Code: _____</p> <p>Magisterial District: _____</p> <p>Telephone number: (_____) _____ Fax number: (_____) _____</p>	
<p>I/we the undersigned undertake to –</p> <p>(h) maintain and keep complete books, accounts and other documents (as contemplated in rule 46A2.31) relating to the originating status, importation, production and exportation of the goods produced for 3 years from the date of production or export or sale to an exporter and make such books, accounts and other documents available at the request of any officer of the South African Revenue Service (SARS);</p> <p>(i) ensure compliance with the provisions of origin contained in the enactments contemplated in the rules numbered 46A2 governing the preferential treatment of goods exported to the Community, Norway or Switzerland;</p> <p>(j) cooperate with the SARS in providing documents, correspondence and reports relevant to any investigation, permit visits to and inspections to manufacturing premises and agree to personal interviews to ascertain needed facts;</p> <p>(k) register with SARS before production begins and de-register when production is closed or ceases;</p> <p>(l) ensure that I / we are fully conversant with the requirements of the relevant enactments, as well as the provisions of the Customs and Excise Act and rules; and</p> <p>(m) notify all persons in writing to whom a certificate of origin was given which I / we have reason to believe contains information that is not correct of any change which could affect its accuracy or validity.</p> <p>_____ (Authorised signature)</p> <p align="right">_____ (Date: YY/MM/DD)</p> <p>_____ (Name in block letters)</p> <p align="right">_____ (Title)</p>	
<p><b>Note:</b> If the producer is also the exporter, form DA 46A2.01 must also be completed</p>	

## Generalized System of Preferences (GSP)

### Application for Certificate of Origin Form A (Rule 46A2 18)

DA 46A2.03

(Page 1 of 2)

<p>1 Goods consigned from (exporter's business name, address, country)</p>	<p>Client Number: .....</p> <p>Producer's name and address:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Form A Number: _____</p>
<p>2 Goods consigned to (consignee's name, address, country)</p>	
<p>3 Means of transport and route (as far as known)</p>	<p>4 For official use</p>

5	Item number	6	Marks and numbers of packages	7	Number and kind of packages, description of goods	8	Origin criterion (see notes overleaf)	9	Gross weight or other quantity	10	Number and date of invoices

**Notes:**

- 1 The particulars to be entered in blocks 1 – 10 must be the same as those entered in the corresponding blocks of Form A and as required in terms of rule 46A2 18
- 2 Supporting documents must include, where relevant, import documents, movement certificates, producer's declarations etc relating to products used in manufacture of the goods exported as contemplated in rule 46A2 18 (1)
- 3 The producer's declaration must be obtained from the producer where the goods are not manufactured or wholly obtained by the exporter
- 4 If the application is signed by a licensed clearing agent, the letter of authority contemplated in rule 46A 2. 18 must be attached to the application
- 5 Documents and copies of documents must be submitted with the export bill of entry as specified in rule 46A2 18
- 6 Books, accounts and documents must be kept as specified in rule 46A2 31
- 7 See definition of list rule in rule 46A2 01

*Please turn over for Declaration by the Exporter*

**Declaration by the Exporter**

I, the undersigned, duly authorised to complete and sign this declaration on behalf of the exporter,

- (1) declare that the goods shown on the attached certificate of origin Form A Number ..... and this application form meet the conditions required for the issue of the certificate;
  
- (2) specify as follows the circumstances which have enabled these goods to meet the above conditions:
  - \*(a) The goods were \*manufactured / \*wholly obtained in the Republic by the exporter and are classified under ..... (4 digit tariff heading)
  
  - \*(b) The goods were bought in for export in the same state and were \*manufactured / \*wholly obtained by ..... (state name of producer) in the Republic and are classified under ..... (4 digit tariff heading).
  
  - (c) The list rule (in respect of goods manufactured) applicable is .....
  
  - (d) Evidence of the originating status of the goods is held by me .....
  
- (3) submit the following supporting documents:  
.....  
.....
  
- (4) undertake to submit, at the request of any officer of the South African Revenue Service (SARS), any supporting evidence which may be required for the purpose of issuing the attached certificate of origin Form A, and undertake, if required, to agree to any inspections of my accounts and to any check on the processes of manufacture of the above goods, carried out by the SARS;
  
- (5) state that -
  - (a) The information in this application is true and correct; and
  
  - (b) The goods comply with the origin requirements specified for these goods in the Generalized System of Preferences for goods exported to .....

..... (Authorised signature)	..... (Exporter's name)	..... (Agent's Name)
..... (Name in block letters)	..... (Client Number)	..... (Client Number)
..... (Title)	..... (Place)	..... (Date)

\* Delete (and sign in full) whichever is not applicable

**Generalized System of Preferences (GSP)**

**DA 46A2.04**

**\* Declaration by Producer  
(Rule 46A2.18)**

Name: .....

Customs Client Number:

Address: .....

I, the undersigned, duly authorised to sign this declaration on behalf of the producer –

(1) Declare that –

(a) the goods specified in Column 1 –

i) have been delivered to .....  
(name and address of exporter) for export to .....

ii) have been produced using the following non-originating materials:

1. Goods manufactured:			2. Description and tariff heading of non-originating materials used	3. Heading of non-originating materials used	4. Value of non-originating materials used
Description	Tariff Heading	***Ex-works price			
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
					Total value: .....

- iii) \*\* the following non-originating materials specified above originated in ..... and have been further worked or processed in the Republic;
- iv) all other materials used are originating;
- v) serially numbered invoices are attached;
- vi) complete accounts and documents relating to the originating status of materials used or worked or processed, the value thereof, the calculation of the ex-works price and other requirements are maintained and kept as contemplated in rule 46A2.31;

(2) State that -

- (a) The information in this application is true and correct;
- (b) The goods comply with the origin requirements for these goods in the Generalized System of Preferences for goods exported to .....

(Authorised signature)

(Name in block letters)

(Title)

(Place and date)

**Note:**

- \* This form must accompany the application for Form A where the exporter is not the producer
- \*\* Insert the Community, Norway or Switzerland, as the case may be (rule 46A2.07 (f) and (g)); delete and sign in full if not applicable
- \*\*\* For a definition of ex-works price see Community Article 66 (CA 66) and Norway section 1 (s 1).

APPLICATION FOR APPROVED EXPORTER	DA 49A.02
AGREEMENT ON TRADE, DEVELOPMENT AND COOPERATION BETWEEN THE EUROPEAN COMMUNITY AND ITS MEMBER STATES AND THE REPUBLIC OF SOUTH AFRICA	Customs Client Number:

TO BE COMPLETED IN TRIPLICATE

FORM FOR THE PURPOSES OF PROTOCOL 1 CONCERNING THE DEFINITION OF THE CONCEPT  
OF "ORIGINATING PRODUCTS" AND METHODS OF ADMINISTRATION CO-OPERATION OF  
THE AGREEMENT ON TRADE DEVELOPMENT AND CO-OPERATION BETWEEN  
THE EUROPEAN COMMUNITY AND THE REPUBLIC OF SOUTH AFRICA

(Article 20 of the Protocol and Rule 49A.18 (19) (20))

- 1 Exporter's name (*hereinafter referred to as "the exporter"*)  


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- 2 Estimated number and value of consignments per annum  


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- 3 Description of goods to be exported and 4 digit tariff headings  


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- 4 Specify how the goods to be exported meet the necessary conditions of origin  


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- 5 Are you the manufacturer of the goods? If yes, briefly describe the manufacturing process  


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- 6 Do you hold evidence that the goods comply with origin criteria? Please submit with the application  


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- 7 Country of destination  


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- 8 The following means of identification of the exporter for the purposes of paragraph 9 (a) is proposed:  


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9 If approved exporter status is granted, the exporter undertakes to –

- (a) accept full responsibility for any invoice declaration which identifies the exporter as if it has been signed in manuscript;
- (b) submit a copy of the required document with the invoice declaration and authorisation number endorsed thereon together with the other export documentation to the Controller and comply with rule 49A. 18(19),(20)(g) if the invoice declaration is made after exportation;
- (c) state proper references or other particulars on the invoice whereby the goods exported can be readily traced in the exporter's records,
- (d) keep proper records to verify the originating status of the goods as required by the said protocol and the rules;
- (e) comply with any conditions or obligations imposed by the Manager: Commercial Services;
- (f) inform the Manager: Commercial Services of any change in legal identity or any matter affecting the originating status of goods exported;
- (g) apply before export for approval if any goods not specified in this application will be exported or exportation of any goods will be discontinued;
- (h) ensure that the goods concerned comply with the relevant provisions of origin; and
- (i) otherwise comply fully with the requirements of rule 49A 18(19)(20).

I declare that –

- I am duly authorised to sign this application;
- the information furnished herein is true and correct; and
- the goods described herein are of South African origin in accordance with the provisions of Protocol 1 referred to in the heading of this form.

-----  
Signed on behalf of the exporter

-----  
Title

-----  
Name in block letters

-----  
Status of signatory to the application

Date: -----

Please confirm who will sign preference documentation. In case of doubt or difficulty please contact the Officer: Origin Administration \_\_\_\_\_, where the completed application should be submitted.

Return Address:  
-----  
-----  
-----

Tel No: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

\*Approved/Not Approved (\*Delete which is not applicable)

Reasons if not approved

-----

-----  
Signed:  
Officer: Origin Administration

-----  
Date