

SARS EXCISE ACCOUNT		TOBACCO PRODUCTS (SOS) - SPECIAL STORAGE WAREHOUSE								DA 260					
LICENSED WAREHOUSE NAME >>>>				WAREHOUSE NUMBER >>>>											
PHYSICAL ADDRESS >>>>				EXCISE CLIENT CODE >>>>											
>>>>				YEAR & MONTH(S) >>>>											
>>>>				FROM DATE >>>>											
>>>>				TO DATE >>>>											
PRODUCT CODE		CTOB		PTOB		PTOB		CIGS		CGAR		HTOB		OTOB	
TARIFF ITEM(S)		104.35.05	104.35.15	104.35.01	104.35.02	104.35.03	104.35.17	104.30.07	104.30.15	104.30.03	104.30.11	104.35.10	104.35.14	104.35.12	104.35.19
TARIFF ITEM(S)															
STATISTICAL UNIT		KG		KG NET		KG NET		CIGARETTES		KG NET		STICKS		KG	
Plus	Opening Balance														
	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 DECLARATIONS			ASSURANCE ACTIVITY		NAME		SIGNATURE		DATE		DATE RECEIVED				
Code	Number	Date	Accepted												
			Face Checked												
			Compliance Checked												
										(OFFICIAL DATE STAMP AND SIGNATURE)					

