

GOODS DECLARATION FORM

CUSTOMS STATION:			
Date: / /	4. Delivery Order:	44. MoT Licence:	
Consignee:		9. TIN:	
14. Declarant/Representative:			
18. Transport:	34. Origin:	40. BL/AWB:	
Attached: (Tick box)	D.O. <input type="checkbox"/>	Invoice <input type="checkbox"/>	Packing List <input type="checkbox"/> BoL/AWB <input type="checkbox"/>

Item No.	Product Description	Qty	Units

Goods and quantities to be listed by Declarant. False declarations of goods may be liable to penalties.
Hantiluhu/Wakiilku waa inu so cadeeya tirade badecada. Caddaymaha been abuurka ah waa lagugu qanaxaya.

I declare that the details above are true to the best of my knowledge:

Name of Declarant: _____ **Signature:** _____

Certified and satisfied as correct:

Customs Exam: _____ **Police Exam:** _____

Reference Numbers on information fields above correspond to Data Fields on SAD.

No. of pages:
