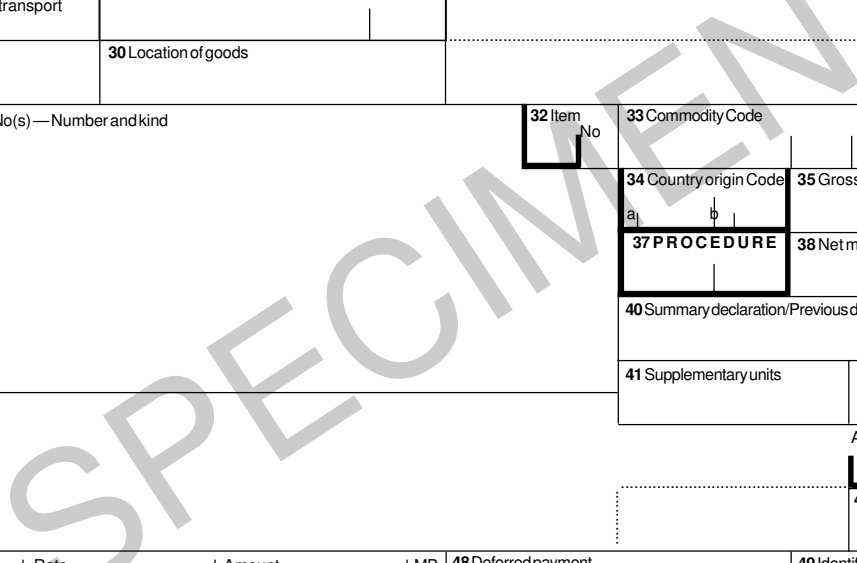


Copy for the country of dispatch/export	1		2 Consignor/Exporter No		1 DECLARATION		3 Forms		4 Loading lists	
	8 Consignee No		9 Person responsible for financial settlement No		5 Items		6 Total packages		7 Reference number	
	14 Declarant/Representative No		15 Country of despatch/export		10 Country first destin.		11 Trading country		13 CAP	
	18 Identity and nationality of means of transport at departure		19 Ctr.		20 Delivery terms		15 C disp./exp. Code		17 Country destin. Code	
	21 Identity and nationality of active means of transport crossing the border		22 Currency and total amount invoiced		23 Exchange rate		24 Nature of transaction			
	25 Mode of transport at the border		26 Inland mode of transport		27 Place of loading		28 Financial and banking data			
	29 Office of exit		30 Location of goods							
	31 Packages and description of goods		32 Item No		33 Commodity Code		34 Country origin Code		35 Gross mass (kg)	
					37 PROCEDURE		38 Net mass (kg)		39 Quota	
	44 Additional information/ Documents produced/ Certificates and authorisations						40 Summary declaration/Previous document		41 Supplementary units	



47 Calculation of taxes	Type	Tax base	Rate	Amount	MP	48 Deferred payment	49 Identification of warehouse
	Total:						
						B ACCOUNTING DETAILS	
						46 Statistical value	

50 Principal No		Signature:		C OFFICE OF DEPARTURE	
51 Intended offices of transit (and country)		represented by			
		Place and date:			

52 Guarantee not valid for		Code		53 Office of destination (and country)	
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D CONTROL BY OFFICE OF DEPARTURE		Stamp:		54 Place and date:	
Result:				Signature and name of declarant/representative:	
Seals affixed: Number:					
Identity:					
Time limit (date):					
Signature:					

1 DECLARATION

4

Copy for the office of destination

2 Consignor/Exporter No

3 Forms
 4 Loading lists
 5 Items
 6 Total packages

8 Consignee No

IMPORTANT NOTE
 Where this copy is used exclusively for establishing the COMMUNITY STATUS OF GOODS NOT MOVING UNDER THE COMMUNITY TRANSIT PROCEDURE, only the information in boxes 1, 2, 3, 4, 5, 14, 31, 32, 35, 54 and, where appropriate, 33, 38, 40 and 44 is needed for that purpose.

14 Declarant/Representative No

15 Country of dispatch/export
 17 Country of destination

18 Identity and nationality of means of transport at departure
 19 Ctr.

21 Identity and nationality of active means of transport crossing the border

25 Mode of transport at the border
 27 Place of loading

4

31 Packages and description of goods

32 Item No
 33 Commodity Code

35 Gross mass (kg)
 38 Net mass (kg)

40 Summary declaration/Previous document

44 Additional information/ Documents produced/ Certificates and authorisations

A.I. Code

55 Transshipments
 Place and country:
 Ident. and nat. new means transp.:
 Ctr. (1) Identity of new container:
 (1) Enter 1 if Yes or 0 if NO.

Place and country:
 Ident. and nat. new means transp.:
 Ctr. (1) Identity of new container:
 (1) Enter 1 if Yes or 0 if NO.

F CERTIFICATION BY COMPETENT AUTHORITIES
 New seals: Number: identity:
 Signature: Stamp:

New seals: Number: identity:
 Signature: Stamp:

50 Principal No
 Signature:

C OFFICE OF DEPARTURE

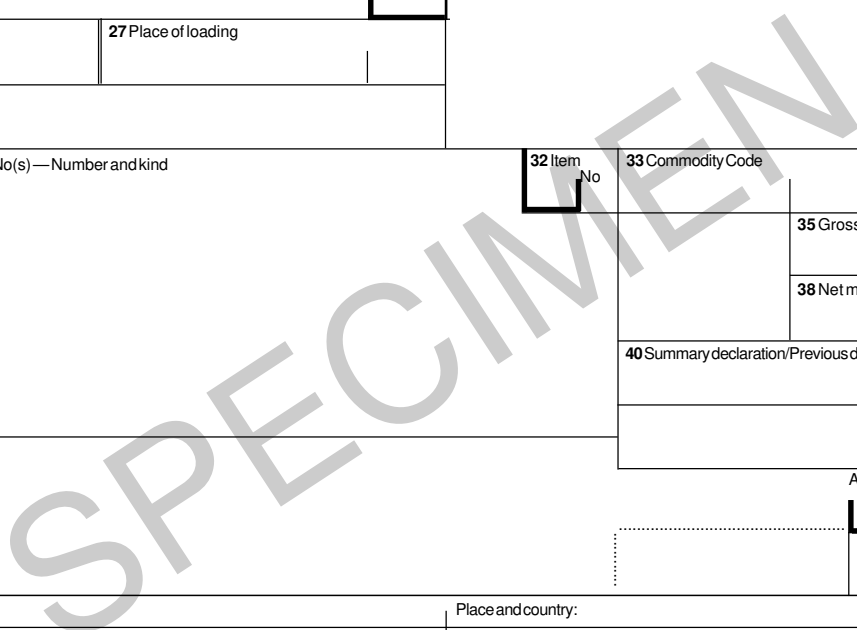
51 Intended offices of transit (and country)
 represented by
 Place and date:

52 Guarantee not valid for

Code 53 Office of destination (and country)

D CONTROL BY OFFICE OF DEPARTURE
 Stamp:
 Result:
 Seals affixed: Number:
 Identity:
 Time limit (date):
 Signature:

54 Place and date:
 Signature and name of declarant/representative:



EUROPEAN COMMUNITY

1 DECLARATION

5	2 Consignor/Exporter	No	3 Forms	4 Loading lists	
	8 Consignee		5 Items	6 Total packages	
			15 Country of dispatch/export		
	18 Identity and nationality of means of transport at departure		19 Ctr.		Tilbagesendes til: Zurücksenden an: Να επιστραφεί Return to: Renvoyer à; Rinviare a: Terugzenden aan: Devolver a:
	21 Identity and nationality of active means of transport crossing the border				
	25 Mode of transport at the border	27 Place of loading			
17 Country of destination		CCTO Custom House Main Road Dovercourt Harwich CO12 3PG ENGLAND			
5					

31 Packages and description of goods	Marks and numbers — Container No(s) — Number and kind	32 Item No	33 Commodity Code
		35 Gross mass (kg)	
		38 Net mass (kg)	
40 Summary declaration/Previous document			

44 Additional information/ Documents produced/ Certificates and authorisations	A.I. Code

55 Transshipments	Place and country:	Place and country:
	Ident. and nat. new means transp.:	Ident. and nat. new means transp.:
	Ctr. <input type="checkbox"/> (1) Identity of new container:	Ctr. <input type="checkbox"/> (1) Identity of new container:
	(1) Enter 1 if Yes or 0 if NO.	(1) Enter 1 if Yes or 0 if NO.

F CERTIFICATION BY COMPETENT AUTHORITIES	New seals: Number: identity:	New seals: Number: identity:
	Signature: Stamp:	Signature: Stamp:

50 Principal	No	Signature:	C OFFICE OF DEPARTURE
	51 Intended offices of transit (and country)	represented by	Place and date:

52 Guarantee	not valid for	Code	53 Office of destination (and country)
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D CONTROL BY OFFICE OF DEPARTURE	Result:	Seals affixed: Number:	Identity:	Time limit (date):	Signature:	Stamp:
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Station/Company code	Port/Station of first lodgement if other than Port of Shipment
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Examination at premises/warehouse

HCO only — compared with stock account
 — compared with HO 16

Tobacco Products only — compared with TP8
 Compared with Excise Control Document

Station reference	Date stamp
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* Not sampled
 * Sample forwarded to Government chemist Signature

Examination at shipment

Rotation number	
Station reference	Date stamp

* Not sampled
 * Sample forwarded to Government chemist Signature

Certificate of shipment	Deficiencies found	Number missing	Number broken	Losses (Qty)	
				Allowed	Chargeable
Bottles					
Cases			X		
Casks			X		
Bulk			X		
Packages For tobacco products only			X		

OPR—Quantities transferred to Box 19 of authorisation

Name and address for return of this copy

* Delete as necessary

<p>56 Other incidents during carriage Details and measures taken</p>	<p>G CERTIFICATION BY COMPETENT AUTHORITIES</p>
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H A POSTERIORI CONTROL (Where this copy is used for establishing the Community status of the goods)

<p>REQUEST FOR VERIFICATION Verification of the authenticity of this document and the accuracy of the information contained therein is requested</p> <p>Place and date: Signature: _____ Stamp: _____</p>	<p>RESULT OF VERIFICATION This document (1)</p> <p><input type="checkbox"/> was certified by the Customs office indicated and the information contained therein is accurate</p> <p><input type="checkbox"/> does not meet the requirements as to authenticity and regularity (see remarks below).</p> <p>Place and date: Signature: _____ Stamp: _____</p>
<p>Remarks:</p>	
<p>(1) Enter <input checked="" type="checkbox"/> where applicable.</p>	

<p>I CONTROL BY OFFICE OF DESTINATION (COMMUNITY TRANSIT)</p> <p>Date of arrival: Examination of seals: Remarks:</p>	<p>Copy no. 5 returned on after registration under No. Signature: _____ Stamp: _____</p>
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SPECIMEN

56 Other incidents during carriage
Details and measures taken

G CERTIFICATION BY COMPETENT AUTHORITIES

SPECIMEN

I CONTROL BY OFFICE OF DESTINATION (COMMUNITY TRANSIT)

Date of arrival:

Examination of seals:

Remarks:

Copy no 5 returned
on
after registration under
No

Signature:

Stamp:

COMMUNITY TRANSIT -- RECEIPT (To be completed by the person concerned before presentation to the office of destination)

This is to certify that the document issued by the Customs office at
..... (name and country) under No.

Stamp of
office of destination:

has been lodged and that no irregularity has been observed to date concerning the consignment to which this document refers.

Date:

Signature: