

## APPLICATION FOR THE LICENSING OF A CLEARING AGENT OR DIRECT TRADER INPUT (DTI) / RENEWAL OF CLEARING AGENT LICENSE

### A. NATURE OF APPLICATION

Please tick with an X:

New Application for Licensing of Clearing Agent / DTI:	Application for Renewal of Clearing Agent License:
<input type="checkbox"/>	<input type="checkbox"/>

If currently licensed in terms of the Customs and Excise Act, 1998 please provide allocated clearing agent code:

### B. NATURE OF BUSINESS

Please tick with an X:

Company:	Close Corporation:	Partnership:	Sole Proprietor:	Other:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### C. TRADING PARTICULARS

Please furnish full particulars / details of Applicant and provide proof of registration with the Business Intellectual Property Authority (BIPA) and Financial Intelligence Centre (FIC):

Trading Name of Business:	
Physical address:	
Town / City:	
Registration Number of Company:	
Telephone Number:	
Postal Address:	
Email address:	

If Company Head Office is different from Trading Particulars above, then please provide details below:

### D. CUSTOMS AND EXCISE REGIONAL OFFICES

Please state the Customs and Excise Regional Office(s) where clearance will be conducted (if they are more, then please provide details on a separate sheet):

Customs and Excise Office:	Physical Address:	Contact Number(s):

### E. AUTHORISED EMPLOYEES TO CLEAR GOODS FOR APPLICANT

Please state the name of each director, manager, member, partner or employee(s) of the applicant who will enter or deliver, for reward, bills of entry relating to any goods on behalf of any importer or exporter of goods and state each place where business will be conducted with Customs and Excise (if they are more, then please provide on a separate sheet):

Name:	Identity Passport / Number:	Place (Customs and Excise Office):

**F. AUTHORITY TO APPLY**

I / We ..... (name of applicant) herein represented by:

Full Name:	Full Name:

Being duly authorized to apply for the licensing of a clearing agent by virtue of - (please tick applicable authority with an X and provide proof)

<input type="checkbox"/>	A resolution passed at a meeting of the Board of Directors held at ..... On the ..... day of ..... ;or
<input type="checkbox"/>	Express consent in writing of all the members of the close corporation / partners of the close corporation / trustees of the trust; or
<input type="checkbox"/>	Being the person having the management of any other association; or
<input type="checkbox"/>	Delegated officer of an Organ of State,

**G: DECLARATION**

I hereby -

- (a) declare that the particulars provided in this application and all enclosed documents are true and correct; and
- (b) undertake to inform the Department of Customs and Excise immediately of any changes in the particulars furnished in the application.

..... Applicant's Full Name	..... Capacity	..... Signature / Date
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**H: FOR OFFICE USE ONLY**

Comments of Principal Customs and Excise Officer:

..... Signature	..... Date
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Recommendation by the Senior Manager: Trade Facilitation, Procedures and Compliance

..... Signature	..... Date
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Recommendation by the Head: Customs and Excise

..... Signature	..... Date
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