

SAD 503 - CUSTOMS DECLARATION FORM

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BILL OF ENTRY QUERY NOTIFICATION / VOUCHER OF CORRECTION

Clearance Office Name:	Entry Registration No.	Date of Entry	Your Reference

To:

PART A : QUERY DETAILS BY CUSTOMS Officer: _____ Date: _____

ITEM NO.	BOX REFERENCE	QUERY

PART B : REPLY / VOUCHER OF CORRECTION REQUEST (See also PART C)

ITEM NO.	BOX REFERENCE	DETAILS ORIGINALLY DECLARED	PLEASE AMEND TO:-

CORRECTED REVENUE SUMMARY

ITEM NO.	ICD	ADV	EXC	VAT	OTHER	
						Revised Total Payable
						[]
						Amount Already Paid
						[]
						Balance : To be Paid/Refunded
						[]
TOTAL						

<p>I, the undersigned, being the * _____ / 's authorised agent DECLARE that the details shown in Part B in response to the queries in Part A are TRUE and COMPLETE.</p> <p>I request that this form be annexed to the original Bill of Entry which should be read subject to the amendments provided hereon.</p> <p>Signature _____ Date _____</p>	<p>FOR OFFICIAL USE</p>
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* Insert importer or exporter