

FROM:

 TEL:
 DATE: / 20

TO: **The Comptroller of Customs**
Customs House
Castries
Saint Lucia
 TEL: **452-3487 / 27966 / 22308**
 FAX: **452-4959**

SUBJECT: REQUEST FOR RELEASE OF PERSONAL AND HOUSEHOLD EFFECTS

I hereby request the release of the following container of my used personal and household effects for examination at my premises.

Container# Seal # which arrived in Saint Lucia
 Ex M/V of

In addition to my used effects, the following **NEW ITEMS** are also enclosed: -

Description of goods	Qty.	Declared Value	Description of goods	Qty.	Declared Value
1.			5.		
2.			6.		
3.			7.		
4.			8.		

I undertake to Submit the relevant Customs declarations and pay all duties due within five (5) working days of examination.

I have been informed that any deposit paid can be paid into general revenue if outstanding after three (3) months and I also have been informed that in the event that any deposit paid being insufficient, the additional amount shall be paid promptly or goods to that value may be recovered by Customs

My allowances have been explained to me and I am fully aware that undeclared goods are liable to forfeiture under Section 113 of the Customs (Control and Management) Act Cap. 1505

I also advise that I have contracted the undersigned Customs Broker (*PRINT NAME*) to attend to all formalities relating to this transaction and he is duly authorized to sign all related documents.

Signed Signed Signed in presence of
 Importer Customs Broker for Comptroller of Customs

FOR OFFICIAL USE ONLY

EXAMINATION OFFICERS ASSIGNED

Amount Deposited \$
 Receipt No.
 Date Paid / 20

Signed
Supervisor Import Station

INTERVIEW

Saint Lucian by Country Last Resided Nos. of years out of State

ATTACHED DOCUMENTS

- | | | |
|---|--|---|
| Copy of Saint Lucian Passport / I.D. <input type="checkbox"/> | Copy of Passport / I.D. <input type="checkbox"/> | Utility Bills. <input type="checkbox"/> |
| Copy of Marriage Certificate if any. <input type="checkbox"/> | Social Security Registration. <input type="checkbox"/> | Job Letter. <input type="checkbox"/> |
| School Attendance records. <input type="checkbox"/> | Income Tax Assessments. <input type="checkbox"/> | Rental Agreements/ Leases. <input type="checkbox"/> |
| | | OTHER |