



# Safirán

## Freight and Cargo Services

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[دانلود نرم افزار PDF Extra](#)

# Malawi Customs & Excise Declaration

FORM 12

2. Exporter/Consignor Name & Address		TPIN	1. Declaration type	Clearance Office	For Official Use.		
			3. Forms	4.	Manifest Number:		
			5. Total Items	6. Total Packages	7. Declarant Reference Number		
8. Importer/Consignee Name & Address		TPIN	9. Person responsible for financial settlement		Advice Note/ AWB/ ATP		
			10. Country of consignment	11	12	13	
			15. Country of dispatch/export	16.		17. Country of destination	
14. Declarant Name & Address		No.	20. Terms of Delivery		Place		
			22. Currency	Total Invoice Value		23. Exchange Rate	24.
			28(A) Financial and Banking Data				
18. Identity & nationality of means of transport at arrival		19. Cntr	Bank Name: .....		Branch Code: .....		
21. Identity & nationality of means of transport at border			Terms of Payment: .....		Guarantee No: .....		
25. Mode of transport at border	26 Inland mode of transport	27. Place of discharge		28 (B). External Freight Charges	Currency	28(C) Insurance	
29. Office of entry/exit		30. Location of goods	Date of arrival/Departure		28(D). Other Charges	Currency	28 (E) Internal freight
				Currency	Currency		

<b>31. Packages &amp; Description of Goods, Marks &amp; numbers – containers no (s) – number &amp; kind</b>			32. Item No.	33. Commodity Code		
Marks & Numbers:			34. Country of Origin		35. Gross Weight (Kgs)	36. Preference Code
Number of Packages:                      Type of packaging:			37. Procedure		38. Net Weight (Kgs)	39.
Container No(s)			40. Preceding Document			
Description of goods:						

<b>44. Add Inform / Docs / Cert &amp; Auth.</b>			41. Supplementary Units		42. Item Invoice Price	
Licence No.:                      /DV:                      /DQ:			43		45.	
Additional Information:						

47 Calculation of taxes				
	Value	Rate	Amount	MOP
Duty				
Excise				
Surtax				
Total:				

46. Customs Value		
48. Account Number	49. Warehouse Code	Period (Days)

ACCOUNTING DETAILS	
Total Taxes:	
Processing Fees:	
Other Charges:	
<b>GRAND TOTAL</b>	<b>K</b>

**50. Declaration by Principal / Representative**

I / We ..... the undersigned of ..... (Company)

being the Agent/Representative for Principal ..... (Importer/Exporter)

do hereby declare that the information and particulars declared herein are true and complete to the best of my Knowledge, abilities and belief and if found to be false I/we shall be liable for prosecution under the Customs & Excise Act

Signature.....

Declared at:..... this day of ..... (Month) ..... (Year) .....

**FOR OFFICIAL USE**

Authorising Officer (Date Stamp)

Name: .....

Signature: .....

Countersigning Officer (Date Stamp)

Name: .....

Signature: .....

51 1 <sup>st</sup> TRANSIT COUNTRY		52 2 <sup>nd</sup> TRANSIT COUNTRY	
<p>OFFICE OF ENTRY</p> <p>I have examined the packages specified on this Declaration and found them to conform to the description given and are undamaged.</p> <p>Details of seal applied:.....</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>	<p>OFFICE OF EXIT</p> <p>Means of transport/packages exported with seals intact</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>	<p>OFFICE OF ENTRY</p> <p>I have examined the packages specified on this declaration and found them to conform to the description given and are undamaged.</p> <p>Details of seal applied:.....</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>	<p>OFFICE OF EXIT</p> <p>Means of transport/packages exported with seals intact</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>

<p>53 Country of Destination</p> <p>OFFICE OF ENTRY</p> <p>Sealing details: (Seal numbers already attached or new seals attached): .....</p> <p>Transit certified:</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>	<p>OFFICE OF FINAL DESTINATION</p> <p>Seals intact</p> <p>Transit completed</p> <p>Identity and nationality of means of transport:</p> <p>.....</p> <p>Name, Signature &amp; Date Stamp</p>
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**Report on Physical Examination**

.....

Officers Name, Signature & Date Stamp. ....

**Report on Documentary Examination**

.....

Officers Name, Signature & Date Stamp. ....