

DEPARTMENT OF THE TREASURY
U.S. CUSTOMS SERVICE

NEW YORK REGION
NEW YORK, NEW YORK

SUPPLEMENTAL DECLARATION FOR
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

1. OWNER OF HOUSEHOLD GOODS
(Last name, first, middle)

2. DATE OF BIRTH

3. CITIZENSHIP

4. PASSPORT (Country and number)

5. SOCIAL SECURITY NO.

6. RESIDENT ALIEN NO.

7. U.S. ADDRESS

8. FOREIGN ADDRESS

9. REASON FOR MOVING

10. EMPLOYER

11. POSITION WITH COMPANY

12. NATURE OF BUSINESS

13. NAME AND TEL NO. OF COMPANY OFFICAL THAT CAN VERIFY INFO.

14. NAME AND ADDRESS OF FREIGHT FORWARDERS, SHIPPING AGENTS

15. SHIPPERS ITINERARY (Specify place of loading and intermediate ports)

16. CERTIFICATION
(circle one)

A. AUTHORIZED AGENT
B. IMPORTER

17. SIGNATURE