CENSUS USE ONLY

U.S. DEPARTMENT OF HOMELAND SECURITIY Bureau of Customs and Border Protection

APPLICATION FOR

	OIVIB NO. 1651-0029.
1. ZONE NO. AND LOCATION (Address)	
2. PORT CODE	-

		SN-TRADE ZO			1						
	AND/OR STATUS DESIGNATION Any data typed after screen scrolls will not print.					2. PORT CODE					
19 CFR 146.22, 146 3. IMPORTING VESSEL (& FLAG)/OTHER CARRIER		.32, 146.35-146.37, 146.39-146.41, 146.44, 146.53, 146.6 4. EXPORT DATE 5.			ORT DATE		6. ZONE ADMISSION NO.				
7. U.S. PORT OF UNLADING		8. FOREIGN PORT OF LADING				9. BILL OF LADING/AWB NO.			10. INWARD M'FEST NO.		
11. INBOND CARRIER		12. I.T. NO. AND DATE			13. I.T. FROM (Port)						
14. STATISTICAL IN	IFORMATION FURNISHED DIRECTLY TO	BUREAU OF CENSUS	BY APPLICA	ANT?		YES	Г	NO			
15. NO. OF PACKAGES AND COUNTRY OF ORIGIN CODE	16. DESCRIPTION OF MERC	HANDISE	17. HTSUS NO.		18 QUAN (HTSI		19. GROSS WEIGHT	20. SEPARATE VALUE & AGGR CHGS.			
prohibited entry	or admission of the above merchandise into into the Foreign-Trade Zone within the me or the status designation indicated:		Foreign-Trade	the best of my k	nowledg	ge and belief amended, an	that the a	146.31, Customs			
(19 CFR 146.42) 24. APPLICANT FIRM NAME (This is a mandatory field)		(19 CFR 146.41) 25. BY (Signature)				(19 CFR 146.44) 26. TITLE			(19 CFR 146.43) 27. DATE (mm/dd/yyyy)		
F.T.Z. AGREES TO RECEIVE MERCHANDISE INTO THE ZONE		28. FOR THE F.T.Z. OPERATOR (Signature)				29. TITLE			30. DATE	(mm/dd/yyyy)	
PERMIT	Permission is hereby granted to transfer the above merchandise into the Zone.	31. PORT DIRECTOR	ORT DIRECTOR OF CBP: BY (Signature)			32. TITLE			33. DATE	(mm/dd/yyyy)	
PERMIT	The above merchandise has been granted the requested status.	34. PORT DIRECTOR OF CBP: BY (Signature)				35. TITLE			36. DATE (mm/dd/yyyy)		
PERMIT TO TRANSFER	37. The goods described herein are authors. 38. CBP OFFICER AT STATION (Signated Association of CBP: The above the state of CBP: The above th	ure) NE (Driver's Signature)	39. TITLE 43. CARTM eived at the Z			xcept as not	40. STAT		41. DATE	(mm/dd/yyyy) (mm/dd/yyyy)	
OPERATOR'S REPORT OF MERCHANDISE RECEIVED AT ZONE	T OF NDISE ED AT			48. TITLE					49. DATE	(mm/dd/yyyy)	

Paperwork Reduction Act Notice: This request is in accordance with the Paperwork Reduction Act of 1995. We ask for the information in order to carry out the laws and regulations administered by the Bureau of Customs and Border Protection and Foreign-Trade Zones Board. These regulations and forms apply to importers/exporters to ensure that they are complying with these laws. It is mandatory. The estimated average burden associated with this collection of information is 17 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0029), Washington, DC 20503.

CBP Form 214 (6-03)