C-TPAT, Company Profile

false

I Accept

```
false
```

Business Type

Select the business type of the company joining the C-TPAT program.

.1.1   Business Type
```
Please Select                    ▼
```
Select a business type

If you have an Application Exception Token enter it below.

.1.2 Application Exception Token
```
[          ]
```

Company Information

Enter the required company information below.

.3.1   Company Name [   ] **Enter a company name**

.3.2   Company Doing Business As [   ]

.3.3   Company Telephone [   ] **Enter a company telephone number**

.3.4   Company Fax [   ]

Primary Address

Enter the primary address of the company.

.4.1   Type [(none)   ▼] **The type is required.**

.4.2   Country/Territory [(none)   ▼] **The country is required.**

.4.3   Street Address [   ] **The address line 1 is required.**

.4.4   Street Address 2 [   ]

.4.5   City [   ]

The city is required. Please enter a valid city.

.4.6   State [(none) ▼] **The state is required.**

.4.7   Zip/Postal Code [   ] **The postal code is required.**

.4.8 Is the address also a mailing address? ☐

Other Addresses

There are no other addresses.

[Add New Address](#)

Additional Company Information

Select the appropriate answers below.

.5.1   Owner Type | Please Select ▼ | **Select an owner type**

.5.2   Years In Business | Please Select ▼ |**Select the number of years in business**

.5.3   Number of Employees

| 1-5 ▼ |**Select the number of employees**

Company Contacts

Enter all of the contacts from your company that will be participating in the C-TPAT program.

Ensure that you have selected a designated Point of Contact (POC) who is an officer of the

company.

NOTE: If you need to change the email address of an existing contact, please delete the existing

contact, then add a new contact with the new email address.

.6.1Contacts

There are no contacts.

Contact Details | Add Contact | |**Please enter at least one contact who is a**
point of contact.
You can only be one of the listed contacts. Make sure 'Are you this user?' is only
selected for one contact.
Email addresses must be unique to one contact. Please make sure that more than one
contact is not using the same email address. A company officer must be listed as a
contact.

| false |

Company Contacts

Enter all of the contacts from your company that will be participating in the C-TPAT program.

Ensure that you have selected a designated Point of Contact (POC) who is an officer of the

company.

NOTE: If you need to change the email address of an existing contact, please delete the existing

contact, then add a new contact with the new email address.

Contact Details

.6.2   Salutation   Mr.

Select a contact type

.6.3   First Name   x

Enter a first name Please enter a valid first name

.6.4   Last Name   x

Enter a last name Please enter a valid last name

.6.5   Contact Title   x

Enter a title

.6.6   Telephone   x

Enter a telephone number

.6.7   Email Address   x   **Enter an email address**

.6.8   Confirm Email Address   x

Confirm your email address Email Address and Confirm don't match

.6.9   Secondary Email Address   x

.6.10   Confirm Secondary Email Address   x

Secondary Email & Confirm don't match

.6.11   Contact Type   Please Select

Select a contact type This contact type is not a valid Point of Contact

.6.12   Primary Company Point of Contact (POC)

.6.13   Are you this user?

.6.14   Contractor Company Name

Enter the company name

.6.15   Contractor Business ID

Enter the business ID

.6.16   Country

Please Select ▼ **Select a**

country

.6.17   Street Address 1 [   ]

Enter the street address

.6.18   Street Address 2 [   ]

.6.19   City [   ] **Enter the city Please enter a**

valid city name

.6.20   State

Please Select ▼ **Select a state**

.6.21   Zip/Postal Code [   ] **Enter the**

zip/postal code

[<< Previous]   [Next >>]   [Cancel Profile]

Business Information

.7.8   In the past 24 months, how many crossings with freight did you transport under your
operating authority into the United States? [   ] **Enter the number of freight crossings**

Enter a numeric value

.7.9   U.S. Department of Transportation (DOT) issued Number [   ] **DOT issued number**

must be a five to seven character alphanumeric code

.7.10 U.S. National Motor Freight Traffic Association issued Standard Carrier Alpha Code
(SCAC) [   ] **SCAC must be a four digit alphabetical code**

Additional IOR Numbers

.7.11   Additional ID [   ] **IOR Number must be in the format of ###-##-####, ##-**

#######?? (where the last two characters are alphanumeric), or ######-##### IOR Number

must be in the format of ###-##-####, ##-#######?? (where the last two characters are

alphanumeric), or ######-##### Manufacturer ID must be a maximum of 15 alphanumeric

characters with the first two being the alphabetical ISO Country Code Manufacturer ID

must be a maximum of 15 alphanumeric characters with the first two being the alphabetical ISO Country Code

Add	Edit	Delete

.7.12   Entered IDs

Enter any terminals or warehouses that you own and their addresses:

There are no highway terminals.

[Add Terminal](#)

4	00000000-0000-00

.7.13   Depress and hold the Control (Ctrl) key to select multiple border crossing locations

```
ALEXANDRIA BAY, NY
AMBROSE, ND
ANDRADE, CA
ANTLER, ND
```
Select at least one border crossing

.7.14   Depress and hold the Control (Ctrl) key to select the services that you offer

```
Truckload
Less Than Truckload (LTL)
Freight Forwarding
Load Brokerage
```
Select at least one service provided

.7.15   Depress and hold the Control (Ctrl) key to select the sources for your drivers

```
Company Drivers
Contractor Owned Operators
Driver Personnel Agencies
```
Select at one source of drivers

<< Previous	Next >>	Cancel Profile

false

C-TPAT-Partner Agreement to Voluntarily Participate

This Agreement is made between xx (hereafter referred to as "the Partner") and U.S. Customs and Border Protection (hereafter referred to as "CBP").

This Agreement between the Partner and CBP will enhance the joint efforts of both entities to better secure the international supply chain to the United States. CBP and the Partner recognize the need to improve and expand existing security practices in order to achieve a more efficient and compliant import process.

The Partner agrees to develop and implement, within a framework consistent with the listed C-TPAT criteria, a verifiable and documented program to enhance security procedures throughout its supply chain. Where the Partner does not exercise control of a production facility, distribution entity, or process in the supply chain, the Partner agrees to communicate the C-TPAT criteria to those entities.

Specifically, the Partner agrees to:

1. Commit to working with business partners and CBP to meet C-TPAT minimum security criteria.
2. Using the online application process (the C-TPAT Security Link Portal), complete a supply chain security profile and update information regarding the company on an annual basis.
3. Provide complete and accurate company information in response to C-TPAT inquiries.
4. Comply with C-TPAT program requirements to ensure integrity at each stage of the Partner�s supply chain.
5. Cooperate with the C-TPAT validation process including assisting the CBP Supply Chain Security Specialists (SCSS) in planning for and conducting site visits.
6. Acknowledge and cooperate with re-validation procedure as deemed necessary by CBP.
7. Maintain security integrity throughout the partnership, conducting periodic self-assessments in line with the changing risks and complexity of international business

and trade.

8. Cooperate with CBP, domestic and foreign port authorities, foreign customs administrations and others in the trade community, in advancing the goals of C-TPAT and the Container Security Initiative (CSI).

9. Acknowledge and accept this Agreement to Voluntarily Participate by marking the �I agree� box below.

Upon acceptance, review, and/or certification in the C-TPAT program, CBP will:

1. Assign a Supply Chain Security Specialist (SCSS) to work individually with the Partner in C-TPAT procedures.

2. Review the Partner�s C-TPAT application within 90 days of receipt.

3. Conduct a C-TPAT validation within one year of the Partner�s C-TPAT certification in accordance with section 215 (a) of the �Security and Accountability for Every Port Act of 2006� (SAFE Port Act), Pub. L. 109-347, 120 Stat. 1917. CBP will, to the extent possible, be flexible to the Partner�s scheduling availability.

4. Provide the Partner with feedback regarding the validation including any security enhancement recommendations, actions required, and recognition of CBP identified best practices.

5. Endeavor to assist the Partner with security threat awareness training and in identifying high risk factors specific to the Partner�s operating environment(s).

6. Not request that the Partner take any action which would conflict with any U.S. laws or regulations relevant to the Partner�s operations.

7. Provide C-TPAT participant verification capability via the Status Verification Interface (SVI).

8. Conduct re-validations in accordance with time frames set forth in section 219 of the SAFE Port Act.

9. Allow the Partner a reasonable timeframe within which to comply with and/or implement security practices or measures that represent an amendment or change to current C-TPAT imposed requirements.

10. Where feasible and to the extent practical, extend specific C-TPAT benefits to Partners at U.S. ports of entry.

11. Provide the opportunity for C-TPAT Partners to be eligible to participate in the

developing Mutual Recognition Program by exchanging information with foreign administrations, which may enable C-TPAT partners to receive more benefits, but only through prior consent of the C-TPAT member.

CBP acknowledges that during the course of the C-TPAT membership relationship between CBP and the Partner, CBP may become privy to proprietary business information. CBP recognizes the confidential nature of such information, and agrees to take the appropriate measures to maintain the confidentiality of this information in accordance with U.S. law.

This Agreement is subject to review by the Partner or CBP and may be terminated with written notice by either party.

This Agreement cannot, by law, exempt the Partner from any statutory or regulatory sanctions in the event that discrepancies are discovered during a physical examination of cargo or the review of documents associated with the Partner�s CBP transactions.

Nothing in this Agreement relieves the Partner of any statutory or regulatory responsibilities under United States law, including any requirements imposed under DHS and CBP statutes and regulations.

xx
Company Name

false   b504e3af-4a4e-4c5

false	c0111459-3f16-46e