OMB No. 1651-0077

Expiration 9-30-2016

C-TPAT, Company Profile

false

NOTICE: THIS SYSTEM CONTAINS TRADE SECRETS AND COMMERCIAL AND FINANCIAL INFORMATION RELATING TO THE CONFIDENTIAL BUSINESS OF PRIVATE PARTIES. THE TRADE SECRETS ACT, (18 U.S.C. 1905), PROVIDES PENALTIES FOR DISCLOSURE OF SUCH INFORMATION. CBP EMPLOYEES WHO VIOLATE THIS ACT AND MAKE WRONGFUL DISCLOSURES OF CONFIDENTIAL COMMERCIAL INFORMATION MAY BE SUBJECT TO A PERSONAL FINE OF UP TO \$1,000, IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH, AND SHALL BE REMOVED FROM EMPLOYMENT. AN IMPROPER DISCLOSURE OF CERTAIN INFORMATION CONTAINED IN THIS SYSTEM WOULD CONSTITUTE A VIOLATION OF THE PRIVACY ACT (5 U.S.C. 552A). VIOLATORS COULD BE SUBJECT TO A FINE OF NOT MORE THAN \$5,000. INFORMATION CONTAINED IN THIS SYSTEM IS SUBJECT TO THE 3RD PARTY RULE AND MAY NOT BE DISCLOSED TO OTHER GOVERNMENT AGENCIES WITHOUT THE EXPRESS PERMISSION OF THE AGENCY SUPPLYING THE ORIGINAL INFORMATION.

PAPERWORK REDUCTION ACT STATEMENT: AN AGENCY MAY NOT CONDUCT OR SPONSOR AN INFORMATION COLLECTION AND A PERSON IS NOT REQUIRED TO RESPOND TO THIS INFORMATION UNLESS IT DISPLAYS A CURRENT VALID OMB CONTROL NUMBER. THE CONTROL NUMBER FOR THIS COLLECTION IS 1651-0077. THE ESTIMATED AVERAGE TIME TO COMPLETE THIS APPLICATION IS 20 HOURS PER RESPONDENT. THE OBLIGATION TO RESPOND IS REQUIRED TO OBTAIN A BENEFIT. IF YOU HAVE ANY COMMENTS REGARDING THIS BURDEN ESTIMATE YOU CAN WRITE TO U.S. CUSTOMS AND BORDER PROTECTION, REGULATIONS AND RULINGS, 90 K STREET, NE, WASHINGTON, DC 20229. EXPIRATION DATE 9-30-2016. false

Business Type

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

		Please Select	_	
.1.1	Business Type			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
Ente	er 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.
.4.81	s the address also a mailing address? \Box
	er Addresses
Т	nere are no other addresses.

Add New Address

Additional Company Information

Select the appropriate answers below.

.5.1	Owner Type
.5.2	Years In Business Please Select 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 o	f 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 D	Add Co	ntact	Please	enter at least one contact who is	a	
point of c	ontact.					
You can o	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	1					

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 l	Please enter a	a valid first name		
.6.4	Last Name	x			
Enter	a last name F	Please enter a	valid last name		
.6.5	Contact Title	X			
Enter	a title		_		
.6.6	Telephone	x			
Enter	a telephone i	number	_		
.6.7	Email Addres	s	Enter an email		
addre	SS				
		_			
.6.8	Confirm Ema	il Address	x		
Confi	rm your emai	l address Em	ail Address and		
Confi	rm don't mato	:h			
.6.9	Secondary En	nail Address	x		
.6.10	Confirm Seco	ondary Email A	Address		
x					
Seco	ndary Email &	r			
.6.11	Contact Type	Please Selec	t 💌		
Selec	t a contact ty	pe This conta	ct type is not a valid		
Point of Contact					
.6.12 Primary Company Point of Contact (POC) \square					
.6.13 Are you this user?					
.6.14	Contractor C	ompany Name	e		
Enter the company name					
.6.15 Contractor Business ID					
Enter the business ID					
.6.16	Country	Please Select	•		

.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

Select a country

.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

ISO Country Code							
Add	Edit	Delete					
			ĺ				
.7.12	En	itered ID)s				

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

	There are no highway terminals.				
A	<u>dd Terminal</u> 4 0000000-0000-0				
.7	ALEXANDRIA BAY, NY AMBROSE, ND ANDRADE, CA ANTLER, ND				
.7	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	.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				
-	<pre></pre>				

false

Mutual Recognition Agreement

Consent for Disclosure of Customs-Trade Partnership Against Terrorism (C-TPAT) Information to the Specified Country Government Officials

Upon completion of this consent, C-TPAT will be authorized to provide the information outlined below to government officials for the country specified. The information will only be provided to those government officials directly responsible for the program in which the United States Customs and Border Protection has entered into Mutual Recognition. The information that will be released will be:

- Company name
- Company identifiers (i.e. SCAC, IOR, MID)
- Program Status
- Date of membership

Your company has the right to revoke this consent at any time by removing the check block for that country. The revocation will not have any effect on any actions taken in reliance on the consent prior to the time consent was revoked.

.8.1 Agreement I Agree

- .8.2 Countries
- Canada
- 🗌 Japan
- □ Jordan
- □ New Zealand (Aotearoa)

Please select at least one country from the list.

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 selfassessments in line with the changing risks and complexity of international business and trade.
- 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).
- 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.
- 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.
- 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).
- Conduct re-validations in accordance with time frames set forth in section 219 of the SAFE Port Act.
- 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.

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Company Name

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SIDEBAR					

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