

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

Approved OMB No. 1651-0029 Exp. 10/31/2018

CENSUS USE ONLY

**APPLICATION FOR
FOREIGN-TRADE ZONE ADMISSION
AND/OR STATUS DESIGNATION**

19 CFR 146.22, 146.32, 146.35-146.37, 146.39-146.41, 146.44, 146.53, 146.66

1. ZONE NO. AND LOCATION (Address)

2. PORT CODE

3. IMPORTING VESSEL (& FLAG)/OTHER CARRIER		4. EXPORT DATE	5. IMPORT 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 INFORMATION FURNISHED DIRECTLY TO BUREAU OF CENSUS BY APPLICANT? <input type="checkbox"/> YES <input type="checkbox"/> NO					

15. NO. OF PACKAGES AND COUNTRY OF ORIGIN CODE	16. DESCRIPTION OF MERCHANDISE	17. HTSUS NO.	18. QUANTITY (HTSUS)	19. GROSS WEIGHT	20. SEPARATE VALUE & AGGR CHGS.
					21. HARBOR MAINTENANCE FEE (19 CFR 24.24)

22. I hereby apply for admission of the above merchandise into the Foreign-Trade Zone. I declare to the best of my knowledge and belief that the above merchandise is not prohibited entry in the Foreign-Trade Zone within the meaning of section 3 of the Foreign-Trade Zones Act of 1934, as amended, and section 146.31, Customs Regulations.

23. I hereby apply for the status designation indicated:

NONPRIVILEGED FOREIGN (19 CFR 146.42)
 PRIVILEGED FOREIGN (19 CFR 146.41)
 ZONE RESTRICTED (19 CFR 146.44)
 DOMESTIC (19 CFR 146.43)

24. APPLICANT FIRM NAME		25. BY (Signature)	26. TITLE	27. DATE
F.T.Z. AGREES TO RECEIVE MERCHANDISE INTO THE ZONE		28. FOR THE F.T.Z. OPERATOR (Signature)		29. TITLE
PERMIT	Permission is hereby granted to transfer the above merchandise into the Zone.	31. PORT DIRECTOR OF CBP: BY (Signature)	32. TITLE	33. DATE
PERMIT		The above merchandise has been granted the requested status.	34. PORT DIRECTOR OF CBP: BY (Signature)	35. TITLE

37. The goods described herein are authorized to be transferred: without exception except as noted below

PERMIT TO TRANSFER	38. CBP OFFICER AT STATION (Signature)				39. TITLE		40. STATION		41. DATE	
	42. RECEIVED FOR TRANSFER TO ZONE (Driver's Signature)				43. CARTMAN		44. CHL NO.		45. DATE	
	46. To the Port Director of CBP: The above merchandise was received at the Zone on the date shown except as noted below:									

FTZ OPERATOR'S REPORT OF MERCHANDISE RECEIVED AT ZONE	47. FOR THE FTZ OPERATOR (Signature)		48. TITLE			49. DATE	
--	--------------------------------------	--	-----------	--	--	----------	--

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 and an expiration date. The control number for this collection is 1651-0029. The estimated average time to complete this application is 15 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 90 K Street NE, Washington, DC 20229.