

INTERNATIONAL TRADE ADMINISTRATION LOW VALUE STEEL IMPORT LICENSE

OMB Control No.: XXX

Expiration Date: XX/XX/XXXX

Form ITA-4141P

Date: XX/XX/XXXX

Contact Fax:
Contact Email:

Steel Import License Enforcement and Compliance US Department of Commerce 1401 Constitution Ave. NW Washington DC, 20230

Washington DC, 20230 Fax: (202) 501-1377
Request for a Low-Value Steel Import License Number
I,on behalf of, hereby request Enforcement and Compliance of the U.S. Department of Commerce, to grant me a multiple-use Steel Import License number for low-valued shipments. I understand that there are certain terms of agreement set in place for the use of the Low-Valued Steel Import License. I understand that once I am granted a license number, I will be obliged to adhere to the following the terms of agreement. I understand that I may use this number more than once, but this license is only valid for covered Steel products with a
value of \$5000.00 or less per entry. I understand that this license number may only be used by the company I represent.
I understand all information provided to U.S. Customs and Border Protection (CBP) in connection with this license number will be monitored by both CBP and Commerce.
I understand that the misuse of this license may result in the inability of my company to use the low-value license and/or the imposition of CBP enforcement action as appropriate.
Attorney In Fact
Applicant Name: Contact Name:
Address of Applicant: Contact Phone:
Comact Fhone:

Public reporting for this collection of information is estimated to be 5 minutes per response, including the time for reviewing instructions, and completing and reviewing the collection of information. All responses to this collection of information are required, and will be provided confidentially to the extent allowed by law. Notwithstanding any other provision of law, no person is required to respond to nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Clearance Officer, International Trade Administration, Department of Commerce, Room 41006, 14th and Constitution Avenue, N.W., Washington, D.C. 20230.

Before submitting this form to the Department of Commerce, you must check the box below to certify that, as a representative of

the manufacturer or importer, the above information is accurate and complete to the best of your knowledge.

I certify that the above information is accurate and complete to the best of my knowledge.