

Petition to Import for Transformation or

Step 1

Step 2

Step 3

Step 4

Step 5

Importer Information

Transformation/Destruction

Shipment Information

Import Summary

Optional Uploads

Importer Information

Please enter all required information below. Fields with red asterisk are required. The 'Company Name' has been pre-populated from your CDX profile and cannot be edited. Click the 'Copy From CDX' link to populate the fields with your CDX profile information.

Importer Information

Copy From CDX

* Company Name

* Contact First Name

* Contact Last Name

* Email

* Phone

* Street Address 1

Street Address 2

* City

* State

* Country

Postal Code

* Importer Number

* Source Country

* Vessel Name

* Expected Year of Import

Expected Month of Import

* Intended Port Of Entry

Select an Option

* Intended Use

Consignee Information

Row	* Company Name	* Contact Name	* Phone	* Email	* Address 1	Address 2	* City	* State	* Country	* Zip Code	Action
1									United States		

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Transformation/ Information

Identify the facility that will receive and destroy the controlled substance(s).

Transformation/Destruction Facility

Row	* Company Name	* Contact Name	* Phone	* Email	* Address 1	Address 2	* City	* State	* Country	* Zip Code	Action
1									United States		

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Shipment Information

Enter the chemical, quantity, and shipment importer number for each controlled substance to be imported in the table below.

Shipment Information

Row	Chemical	Quantity of Chemical Recovered (kg)	Shipment Importer Number	Action
1				+ x

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Review the information below for accuracy

Row	Chemical	Commodity Code	Total Quantity (kg)

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Optional Uploads

Optional Uploads

Upload any additional documents/resources, as needed. Please indicate the type of document/resource uploaded via the 'Document Description' field if you specify the document type as 'Other'.

Row	Document Name	Document Type	Document Description	Action
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Add document

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