Form **ITA-4093P**  **OMB Control No. 0625-0125**

(6-05) **Expiration Date: 04/30/2021**

**U.S. DEPARTMENT OF COMMERCE S**pecial Action

**International Trade Administration**

**APPLICATION FOR AN** Application for Amendment





**EXPORT TRADE CERTIFICATE OF REVIEW**

**No Export Trade Certificate may be issued unless a completed application form has been received**  Request for Expedited Review



**(15 USC 4011-4021).**

**DEPARTMENT OF COMMERCE USE ONLY**  See instructions below

NAME OF APPLICANT DATE RECEIVED DATE DEEMED SUBMITTED

**CONFIDENTIALITY OF APPLICATION**

Information submitted by any person in connection with the issuance, amendment, or revocation of a Certificate of Review is exempt from disclosure under the Freedom of Information Act, Section 552, Title 5, United States Code.

Except as provided under Section 309(b)(2) of the Export Trading Company Act (“ACT”) and 15 CFR 325.16(b)(3), no officer or employee of the United States shall disclose commercial or financial information submitted pursuant to the Act if the information is privileged or confidential and if disclosure of the information would cause harm to the person who submitted the information.

**OTHER CONSIDERATIONS**

NOTE: The exchange among competitors of competitively sensitive information may, in some circumstances, create risks that competition among the firms will be lessened and antitrust questions raised. The exchange of information about recent or future prices, production, sales or confidential business plans is especially sensitive. As a general matter, the danger that such exchanges will have anticompetitive effects is less when the firms involved have a small share of the market and greater if they have a substantial share.

Applicant may wish to consider seeking the advice of legal counsel on whether any steps would be advisable in the applicant’s particular circumstances to avoid issues of this nature. One possible step that the applicant may wish to consider in preparing the application is to compile and submit these types of information through an unrelated third party, such as an attorney or consultant.

**INSTRUCTIONS**

The Department of Commerce urges applicants to read Title III of the Export Trading Company Act (P.L. 97-290, Section 4011-4021, Title 15, United States Code) and the accompanying regulations (Volume 15, Code of Federal Regulations, Part 325) and the guidelines (50 FR 1786) before completing this application form. These documents and additional information and guidance on the certification program are available free from Export Trading Company Affairs, Telephone (202) 482-5131, and can also be found at www.trade.gov/mas/ian/etca/index.asp.

Space is provided on the attached form for some of the information requested. In most cases you are being asked to supply additional information on supplemental sheets or attachments. Please include the name of the applicant on each supplement or attachment, and specifically identify the item number to which the attachment refers. The two certifying statements on the last page of this form MUST be completed before your application will be deemed submitted. Please designate the documents or information which you consider privileged or confidential and disclosure of which would cause you harm.

File an original and two copies of the completed application by first class mail, registered mail, or email to: Export Trading Company Affairs, International Trade Administration, Room 21028, U.S. Department of Commerce, Washington, DC 20230; or by personal courier service during business hours to: U.S. Department of Commerce Courier Center, Room 1874; or by email to: etca@trade.gov.

In response to the questions in this application the applicant is requested to be as specific as possible. Some information, in particular the identification of goods or services that the applicant exports or proposes to export, is requested in a certain form (North American Industry Classification System (NAICS) if reasonably available.) Where information does not exist in the requested form, an applicant is not required to create it, and may satisfy the request for information by providing it in some other convenient form.

NOTE: It may not be necessary for every applicant to respond to every question on this form. If an applicant believes that certain information requested is not necessary for a determination on the application, the applicant may request a waiver prior to submitting the application. The applicant should contact Export Trading Company Affairs on (202) 482-5131.

**AGENCY DISCLOSURE OF ESTIMATED BURDEN**

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0625-0125. Without this approval, we could not conduct this survey/information collection. Public reporting for this information collection is estimated to be approximately 32 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary to obtain benefits. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the International Trade Administration, 1401 Constitution Ave, NW, Washington, DC 20230, Attn: Senior International Economist, Amanda Reynolds, Amanda.reynolds@trade.gov.

**ITEM 1: Applicant/Organizer Information**

Name of Applicant:

Principal Address: Street Room or Suite

City State Zip

Email:

Name of Applicant’s Controlling Entity, if any (if none enter “none”):

Principal Address:

Street Room or Suite

City State Zip

**Individual(s) authorized by the applicant to submit application and to whom all correspondence should be addressed**:

Name:

Title:

Address: Street Room or Suite

City State Zip

Telephone:

Email:

Relationship to Applicant:

**ITEM 2: Name and principal address of each member, and of each member’s controlling entity, if any.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 2.)

Note - the members of a Certificate are all firms or entities that are covered by and receive the protection of the Certificate other than the applicant itself.

**ITEM 3: A copy of any legal instrument under which the applicant is organized or will operate. Include copies, as appropriate, of its corporate charter, bylaws, partnership, joint venture, membership, or other agreements or contracts under which the applicant is organized.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 3.)

**ITEM 4: A copy of the applicant’s most recent annual report (corporate document, not DOC AR if amending), if any, and that of its controlling entity, if any.**

To the extent the information is not included in the annual report, or in other documents submitted in connection with this application, attach a brief description of the applicant’s domestic, import and export operations, including:

**(i) The nature of its business;** (Export facilitators or intermediaries who are available to export any type of product or service but who do not manufacture, produce, or directly provide any products or services may respond “all products and services.” To the extent that a facilitator or intermediary specializes, please describe such products and/or services.)

**(ii) The role of the applicant with respect to the proposed Certificate and the Certificate’s members and methods of operations.**

**(iii) The location(s) of its operations.**

**(iv) The geographic location of its customers (foreign and domestic).**

This description may be supplemented by a chart or table.

(Attach your response to this application, clearly identifying the attachment as response to ITEM 4.)

**ITEM 5: A copy of each member’s most recent annual report (corporate document, not DOC AR if amending), if any, and that of its controlling entity, if any.**

To the extent the information is not included in the annual report, or in other documents submitted in connection with this application, attach a brief description of each member’s domestic, import, and export operations, including**:**

**(i) The nature of its business;**

**(ii) The locations of its operations.**

**(iii) The geographic location of its customers (foreign and domestic) .**

This description may be supplemented by a chart or table.

(Attach to this application, clearly identifying attachment as response to ITEM 5.)

**ITEM 6:**

**(i) Names, titles, and responsibilities of the applicant’s directors, officers, partners, and managing officials, and**

**(ii) their business affiliations with the members or other businesses that produce or sell any of the types of goods or services described in ITEM 7, below.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 6.)

**ITEM 7A:**

**(i) A description of the goods or services that the applicant exports or proposes to export under the Certificate.** This description should reflect the industry’s customary definitions of products and services and should include a description of the product’s purpose or use. If the information is reasonably available, please identify the goods or services according to the North American Industry Classification System (NAICS). Goods should normally be identified at the 6-digit level. Services should be identified at the most detailed level possible.

**(ii) For each class of goods or services proposed to export under the Certificate, please provide the principal geographic area(s) in the United States in which the applicant and each member sell their goods and services.**

**(iii) Identify the foreign geographic areas to which the applicant and each member intend to export their goods and services.** If applicable state “worldwide”.

(Attach your response to this application clearly identifying the attachment as response to ITEM 7A.)

**ITEM 7B:** **For each of the previous two fiscal years please provide the dollar value of the applicant’s and each member’s (i) total domestic sales, if any, and (ii) total export sales, if any.**  Include separately the value of sales of any controlling entities and all entities under their control. If domestic and export quantities are also available, please include these values as well.

(Attach your response to this application, clearly identifying the attachment as response to ITEM 7B.)

**ITEM 7C:**  **For *each* product or service to be covered by the Certificate, indicate the best information or estimate accessible to the applicant of the total value of sales in the United States by all companies (whether or not members of the proposed Certificate) for each of the last two (2) years.** Identify the source of the information or the basis of the estimate. If the proposed Certificate will cover “all products and services” you may skip this item.

(Attach your response to this application, clearly identifying the attachment as response to ITEM 7C.)

**ITEM 7D: Provide the following background information:**

**(i)** **For *each* product to be covered by the Certificate**

**1. The estimated number of** **domestic producers selling in the U.S. market;**

**2. The estimated number of importers and/or foreign producers who directly supply product in the U.S. market;**

**3. A list of the top five competitors who are *not* proposed members of this Certificate, in terms of sales in the U.S. market, and an estimate of their respective (%) share in the U.S market;**

**4. The estimated share of the U.S. market accounted for by the firms to be covered by the Certificate;**

**5. The principal geographic area(s) in the United States in which these products are sold;**

**(ii) Other products with the same or similar purpose or use as the products to be covered by the proposed Certificate;**

**1. The estimated number of** **domestic producers selling in the U.S. market;**

**2. The estimated number of importers and/or foreign producers who directly supply product in the U.S. market;**

**Please provide any other background or industry information that the applicant believes will be necessary or helpful to a determination of whether to issue a Certificate under the standards of the Export Trading Company Act.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 7D.)

**ITEM 8:** **Describe the specific export conduct which the applicant seeks to have certified. Only the specific export conduct described in the application will be eligible for certification.**

Examples of export conduct that applicants may seek to have certified include the manner in which goods and services will be obtained or provided; the manner in which prices or quantities will be set; exclusive agreements with U.S. suppliers or export intermediaries; territorial, quantity, or price agreements with U.S. suppliers or export intermediaries; and restrictions on membership or membership withdrawal. These examples are given only to illustrate the type of export conduct which might be of concern. The specific activities that the applicant may wish to have certified will depend on the applicant’s particular circumstances or business plans.

(Attach your response to this application, clearly identifying attachment as response to ITEM 8.)

**ITEM 9: If the export trade, export trade activities, or methods of operation for which certification is sought will involve any agreement or any exchange of information among suppliers of the same or similar products or services with respect to domestic prices, production, sales, or other competitively sensitive business information, specify the nature of and need for the agreement or exchange of information.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 9.)

**ITEM 10: A statement whether the applicant intends or reasonably expects that any exported goods or services covered by the proposed Certificate will re-enter the United States, either in its original or modified form. If so, identify the goods or services and the manner in which they may re-enter the United States.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 10.)

**ITEM 11: For** **the goods and services to be exported, provide (if known) the names and addresses of the suppliers (and the goods and services to be supplied by each) unless the goods and services to be exported are to be supplied by the applicant and/or its members only.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 11.)

**ITEM 12: (Optional) A proposed draft Certificate.**

(Attach your response to this application, clearly identifying the attachment as response to ITEM 12.)

**ITEM 13**: **If the applicant is requesting expedited review of its application, specify the facts and circumstances which warrant it in the space below.**

The justification should explain why expedited action is needed, such as bidding deadlines, infrequent shipping service to the point of destination, or other circumstances beyond the control of the applicant that require the applicant to act in less than 90 days, and that have significant impact on the applicant’s export trade. The justification should include the dollar value of export sales that would be lost if an expedited review is not granted.

(If additional space is necessary, attach your response to this application, clearly identifying the attachment as response to ITEM 13.)

**CERTIFICATIONS**

**I certify that the applicant named in ITEM 1 above and each of the members listed in ITEM 2 above has authorized me to submit this application and the attachments, and to represent the applicant and members, if any, in seeking an Export Trade Certificate of Review.**

**TYPED** **OR PRINTED NAME SIGNATURE (SIGN IN INK) DATE**

**I certify that to the best of my knowledge and belief that the information submitted in this application and the attachments is true and correct and fully responds to all items in the application.**

**TYPED OR PRINTED NAME SIGNATURE (SIGN IN INK) DATE**

FORM ITA 4093-P (REV. 06-05) USCOMM-DC 85-2 1655