

Enforce and Protect Act (EAPA) Allegation Submission

Fields marked with an Asterisk (*) are required

Step 1 - Tell us about yourself

Filer Category: Private Sector Entity U.S. Government Entity

Are you a small business? Yes No
 Link: [Small Business Administration](#)

Are you a lawyer or agent representing an interested party? Yes No
 If you are an agent, a copy of the Power of Attorney must be attached to this submission. Select the FILE UPLOAD function on the next page to attach your document.

First Name:

Middle Name:

Last Name:

Business or Company Name:

Mailing or Business Address:

Phone Number:

Contact E-Mail:

Confirm E-Mail:

Name of Company you Represent:

Interested Party Designation:

Step 2 - Tell us about the allegation

Is this an Immediate Threat to Loss of Life or Damage to Property? If you selected "yes" contact 1-800-BE-ALERT (1-800-232-6378) immediately.

Is there a suspected Health and Safety Risk to the Public? Yes No

Violation Type:

AD/CVD Order Number(s):

U.S. International Trade Commission: addrcd.cbp.gov/index.asp

Product Description:

HTSUS Product Category:

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Product Description:

HTSUS Product Category:

Evasion Violation Description:

Step 3 - Tell us about the alleged violating Importer

Name of Importer Suspected of Evasion:

Violator Address 1:

Violator Address 2:

Violator City:

Violator State U.S.:

Violator Country:

Violator Zip Code:

Certifications 165.5 (b)(2):

- 1. On behalf of the party making this submission, I certify that all statements in this submission (and any attachments) are accurate and true to the best of my knowledge and belief. Acknowledge
- 2. On behalf of the party making this submission, I certify that any information for which I have not requested business confidential treatment pursuant to 19 CFR 165.4(a), may be released for public consumption. Further, in accordance with 19 CFR 165.4(d), this information is either the information the party making the submission has a right to make public (e.g., information from its own business records) or information that was publicly obtained or in the public domain. Acknowledge
- 3. On behalf of the party making this submission, I certify that I will advise CBP promptly of any knowledge of or reason to suspect that the covered merchandise poses any health or safety risk to U.S. consumers pursuant to 19 CFR 165.7(a). Acknowledge

Informed Consent 165.11(c):

- On behalf of the party making this submission, I certify my understanding and consent that the information provided for in 19 CFR 165.11(b)(1) through (5) may be released for public consumption. Acknowledge

Signature:

* This serves as an electronic signature, per 19 CFR 165.11(d), and declares that the person signing the allegation on behalf of the interested party must include his or her name, position in the company or other affiliation, and provide contact information. Acknowledge

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