

Exclusion Request Form

1. Requesting Organization Information

Full Requesting Organization Legal Name *(Public)

Requesting Organization Mailing Address

Street Address Line 1 *(BCI)

Street Address Line 2 *(BCI)

City *(BCI)

State *(BCI)

Zip Code *(BCI)

Country *(BCI)

Importer of Record Number *(BCI)

Point of Contact First Name *(BCI)

Point of Contact Last Name *(BCI)

Point of Contact Email Address *(BCI)

Point of Contact Phone Number *(BCI)

Website *(Public)

Does the requesting organization meet the size standards for a U.S. small business as established by the Small Business Administration? *(Public)

YES/NO/Not Sure

Are you an authorized representative/agent submitting on behalf of the requesting organization? *(Public) YES/NO

Authorized Representative/Agent Name *(Public)

Authorized Representative/Agent Mailing Address

Street Address Line 1 *(BCI)

Street Address Line 2 *(BCI)

City *(BCI)

State *(BCI)

Zip Code *(BCI)

Country *(BCI)

Point of Contact First Name *(BCI)

Point of Contact Last Name *(BCI)

Point of Contact Email Address *(BCI)

Point of Contact Phone Number *(BCI)

Website *(Public)

Who will be the primary point of contact? (Select One)

a. Requesting Organization

b. Authorized Representative/Agent

c. Requesting Organization and Authorized Representative/Agent

2. Manufacturing Equipment Description

Please select from the following pull down menu the 8-digit HTSUS item number for the Chinese-origin manufacturing equipment that you wish to address in this exclusion request.

Please provide the 10-digit HTSUS item number for the Chinese-origin manufacturing equipment you wish to address in this exclusion request. *A 10-digit HTSUS number is required.* *(Public)

Use numerical characters only with no special characters (Example: 1023456789). For help with finding the HTSUS item number associated with your product, see <https://hts.usitc.gov/>. If the unique piece of manufacturing equipment of concern can be imported under multiple 10-digit HTSUS item numbers, please provide all applicable 10-digit HTSUS item numbers.

Please provide a complete and detailed description of the particular Chinese-origin manufacturing equipment of concern. *(Public) A detailed description of the manufacturing equipment includes, but is not limited to, its physical characteristics (e.g., dimensions, weight, material composition, etc.), whether the manufacturing equipment is designed to function in or with a particular machine (application), the unit value of the manufacturing equipment (please provide a range if necessary), and any unique physical features that distinguish it from other manufacturing equipment within the covered 10-digit HTSUS subheading. If needed, please attach images and specification sheets, CBP rulings, court decisions, and previous import documentation below. **Please also describe the manufacturing equipment's principal use.**

Note: USTR will not consider requests that identify the manufacturing equipment using criteria that cannot be made available to the public. USTR will not consider requests in which more than one unique piece of equipment is identified.

- a. Manufacturing Equipment Name and Description (e.g., dimensions, weight, material composition, etc.): *(Public)**
- b. Manufacturing Equipment Function, Application, and Principal Use: *(Public)**
- c. SKU or product number: *(Public)**
- d. Manufacturer of the good: *(Public)**
- e. Please upload any relevant attachments that will help identify and distinguish the requesting organization's manufacturing equipment (e.g., CBP rulings, photos and specification sheets, and previous import documentation). *(Public)**

3. **Is the Chinese-origin manufacturing equipment of concern subject to an antidumping or countervailing duty order issued by the U.S. Department of Commerce? *(Public)**
4. **Will the Chinese-origin manufacturing equipment of concern be used for domestic manufacturing? *(Public) YES/NO. If you indicate “YES”, please describe how the Chinese-origin manufacturing equipment of concern will be used for domestic manufacturing, as well as indicate the manufacturing sector.**
5. **If applicable, please submit documents showing grant funding from, or grant application to, a federal investment program related to the domestic manufacturing at issue, such as the IRA, CHIPS Act, Build America Buy America (BABA), Rural Energy for America Program (REAP). *(BCI)**
6. **Please address whether the manufacturing equipment of concern, or comparable manufacturing equipment, is available from sources in the United States? *(Public)**
7. **Please address whether the manufacturing equipment of concern, or comparable manufacturing equipment, is available from sources in third countries? *(Public)**
8. **Please discuss any attempts of the requesting organization to source the manufacturing equipment of concern from the United States or third countries. *(Public)**
9. **Has the requesting organization purchased the manufacturing equipment of concern from a source in the United States or in a third country in the past five years? If so, please describe why the manufacturing equipment of concern is no longer available from this source. *(Public)**
10. **Please comment on whether granting the exclusion request for the particular manufacturing equipment of concern would support domestic manufacturing. You must explain why you believe granting the exclusion request would or would not support domestic manufacturing. *(Public)**
11. **Please comment on whether the manufacturing equipment of concern is strategically important or related to “Made in China 2025” or other Chinese industrial programs. You must explain why you believe the manufacturing equipment of concern is or is not strategically important or related to “Made in China 2025” or other Chinese industrial programs. *(Public)**
12. **Please describe the supply chain of the manufacturing equipment of concern and any planned future supply chain modifications. *(BCI)**

13. Please describe the projected future import trends of the manufacturing equipment of concern. *(BCI)
14. Include any additional attachments that should be considered along with this exclusion request (e.g., customs rulings, court decisions, previous import documentation, etc.). Please do not include attachments that contain your written argument. *(Submitter Determines BCI or Public).

Objection to Exclusion Request Form

1. Objecting Organization Information

Full Objecting Organization Legal Name *(Public)
Objecting Organization Mailing Address
Street Address Line 1 *(BCI)
Street Address Line 2 *(BCI)
City *(BCI)
State *(BCI)
Zip Code *(BCI)
Country *(BCI)
Point of Contact First Name *(BCI)
Point of Contact Last Name *(BCI)
Point of Contact Email Address *(BCI)
Point of Contact Phone Number *(BCI)
Website *(Public)

Are you an authorized representative/agent submitting on behalf of the objecting organization? *(Public) YES/NO

Authorized Representative/Agent Name *(Public)
Authorized Representative/Agent Mailing Address
Street Address Line 1 *(BCI)
Street Address Line 2 *(BCI)
City *(BCI)
State *(BCI)
Zip Code *(BCI)
Country *(BCI)
Point of Contact First Name *(BCI)
Point of Contact Last Name *(BCI)
Point of Contact Email Address *(BCI)
Point of Contact Phone Number *(BCI)
Website *(Public)

Who will be the primary point of contact? (Select One)

- Objecting Organization
- Authorized Representative/Agent
- Objecting Organization and Authorized Representative/Agent

2. **What is the objecting organization’s relationship to the manufacturing equipment identified in the exclusion request (select all that apply):**
 - a. U.S. manufacturer of equipment identified in the exclusion request, or comparable manufacturing equipment
 - b. Third-country manufacturer or importer of equipment identified in the exclusion request, or comparable manufacturing equipment
 - c. Industry Association
 - d. Other

3. **Please identify the reasons you object to the exclusion request. *(Public)**
Organizations filing objections should identify any factual problems in the exclusion request (e.g. product description).

4. **Is the manufacturing equipment identified in the exclusion request, or comparable manufacturing equipment, currently manufactured in the United States? *(Public) YES/NO**
If you indicate “YES”, identify the name(s) and location(s) of the production facilities in the United States. *(Submitter Determines BCI or Public)

5. **Is the manufacturing equipment identified in the exclusion request, or comparable manufacturing equipment, currently manufactured or able to be imported in/from third country sources? *(Public) YES/NO**
If you indicate “YES”, identify the name(s) and location(s) of the production facilities in third-countries. *(Submitter Determines BCI or Public)

6. **Please discuss the substitutability of the manufacturing equipment from the United States or third country sources as compared to the Chinese-origin manufacturing equipment identified in the exclusion request. *(Public)**

7. **Please provide a complete and detailed description of the manufacturing equipment from the United States or third country sources relative to the description cited in the exclusion request. *(Public)**
 - a. **Manufacturing Equipment Name and Description (e.g., dimensions, weight, material composition, etc.): *(Public)**

 - b. **Manufacturing Equipment Function, Application, and Principal Use: *(Public)**

 - c. **Please upload any relevant attachments that will help identify and distinguish the manufacturing equipment from the United States or third country sources (e.g., CBP rulings, photos and specification sheets, and previous import documentation). *(Public)**

8. **Has the objecting organization within the last two years attempted to sell, or successfully sold, the manufacturing equipment described in the exclusion request, or comparable manufacturing equipment, to the organization requesting the exclusion? *(Public) YES/NO. If you indicate “YES”, please provide supporting documentation. *(Submitter Determines BCI or Public).**

9. **Include any additional attachments that should be considered along with this objection to the exclusion request (e.g., customs rulings, court decisions, previous import documentation, etc.). Please do not include attachments that contain your written argument. *(Submitter Determines BCI or Public).**

Rebuttal to Objection Form

1. Rebutting Organization Information

Full Rebutting Organization Legal Name *(Public)
 Rebutting Organization Mailing Address
 Street Address Line 1 *(BCI)
 Street Address Line 2 *(BCI)
 City *(BCI)
 State *(BCI)
 Zip Code *(BCI)
 Country *(BCI)
 Point of Contact First Name *(BCI)
 Point of Contact Last Name *(BCI)
 Point of Contact Email Address *(BCI)
 Point of Contact Phone Number *(BCI)
 Website *(Public)

Are you an authorized representative/agent submitting on behalf of the rebutting organization? *(Public) YES/NO

Authorized Representative/Agent Name *(Public)
 Authorized Representative/Agent Mailing Address
 Street Address Line 1 *(BCI)
 Street Address Line 2 *(BCI)
 City *(BCI)
 State *(BCI)
 Zip Code *(BCI)
 Country *(BCI)
 Point of Contact First Name *(BCI)
 Point of Contact Last Name *(BCI)
 Point of Contact Email Address *(BCI)
 Point of Contact Phone Number *(BCI)
 Website *(Public)

Who will be the primary point of contact? (Select One)

- a. Rebutting Organization
- b. Authorized Representative/Agent
- c. Rebutting Organization and Authorized Representative/Agent

- 2. Please identify the reasons you are rebutting the objection to an exclusion request. *(Public)**
- 3. Include any additional attachments that should be considered along with this rebuttal (e.g., customs rulings, court decisions, previous import documentation, etc.). Please do not include attachments that contain your written argument. *(Submitter Determines BCI or Public).**

Support of Exclusion Request Form

2. Supporting Organization Information

- Full Supporting Organization Legal Name *(Public)
- Supporting Organization Mailing Address
 - Street Address Line 1 *(BCI)
 - Street Address Line 2 *(BCI)
 - City *(BCI)
 - State *(BCI)
 - Zip Code *(BCI)
 - Country *(BCI)
- Point of Contact First Name *(BCI)
- Point of Contact Last Name *(BCI)
- Point of Contact Email Address *(BCI)
- Point of Contact Phone Number *(BCI)
- Website *(Public)

Are you an authorized representative/agent submitting on behalf of the supporting organization? *(Public) YES/NO

- Authorized Representative/Agent Name *(Public)
- Authorized Representative/Agent Mailing Address
 - Street Address Line 1 *(BCI)
 - Street Address Line 2 *(BCI)
 - City *(BCI)
 - State *(BCI)
 - Zip Code *(BCI)
 - Country *(BCI)
- Point of Contact First Name *(BCI)
- Point of Contact Last Name *(BCI)
- Point of Contact Email Address *(BCI)
- Point of Contact Phone Number *(BCI)
- Website *(Public)

Who will be the primary point of contact? (Select One)

- d. Supporting Organization
- e. Authorized Representative/Agent
- f. Supporting Organization and Authorized Representative/Agent

4. Please identify the reasons you support the exclusion request being granted.

***(Public)**

5. Include any additional attachments that should be considered along with this support of the exclusion request (e.g., customs rulings, court decisions, previous import documentation, etc.). Please do not include attachments that contain your written argument. *(Submitter Determines BCI or Public).