

DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

OMB CONTROL NUMBER: 1651-0029 EXPIRATION DATE: 01/31/2026

ZONE NO. AND LOCATION (Address)

PORT CODE

CENSUS USE ONLY	
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APPLICATION FOR FOREIGN-TRADE ZONE ADMISSION AND/OR STATUS DESIGNATION

19 CFR 146.32, 146.40

IMPORTING VESSEL (& FLAG)/OTHER CARRIER			EXPOR	RT DATE	MPORT DATE ZONE ADMISSION NO.			
U.S. PORT OF UNLADING		FOREIGN PORT OF LADING		BILL OF LADING	BILL OF LADING/AWB NO. INV			
INBOND CARRIER I		.T. NO. AND DATE		I.T. FROM (Port)				
STATISTICAL INFORMATION FURNISHED DIRECTL		LY TO BUREAU OF CENSUS BY APPLICANT		T? YES NO				
NO. OF PACKAGES AND COUNTRY OF ORIGIN CODE		RCHANDISE		ITSUS NO.	QUANTITY (HTSUS)	GROS WEIGH		
					IANCE FEE (19 CF		•	
merchandise	ly for admission of the above mercha is not prohibited entry in the Foreign 146.31, Customs Regulations.	andise into the Foreign n-Trade Zone within th	n-Trade i e meani	Zone. I declare to ing of section 3 o	o the best of my kn f the Foreign-Trade	owledge and le Zones Act of	belief that the above 1934, as amended,	
I hereby apply fo	r the status designation indicated: NONPRIVILEGED FOREIGN (19 CFR 146.42)	PRIVILEGED FOREIGN (19 CFR 146.41)		ZONE RESTRICTED (19 CFR 146.44)		DOMESTIC (19 CFR 146.43)		
APPLICANT FIRM NAME		BY (Signature)		TITLE		DATE		
	S TO RECEIVE SE INTO THE ZONE	FOR THE F.T.Z. OPERATOR (Signature)			TITLE		DATE	
PERMIT	Permission is hereby granted to transfer the above merchandise into the Zone.	PORT DIRECTOR OF CBP: BY (Signature)			TITLE			
PERMIT	The above merchandise has been granted the requested status.	PORT DIRECTOR OF CBP: BY (Signature)			TITLE	TITLE DATE		
PERMIT TO	The goods described herein are aut	horized to be transferre	ed:	wi	thout exception	exc	ept as noted below	
TRANSFER	CBP OFFICER AT STATION (Signa	ature)) TITLE			STATION	DATE	
	RECEIVED FOR TRANSFER TO Z	ONE (Driver's Signatui	ature) CARTMAN		CHL NO.		DATE	
FTZ OPERATOR'S REPORT OF MERCHANDISE RECEIVED AT	To the Port Director of CBP: The above merchandise was received at the Zone on the date shown except as noted below:							
ZONE	FOR THE FTZ OPERATOR (Signat			TITLE			DATE	
		0 - 1 - 1	OTIO 4 I	0001				

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0029. The estimated average time to complete this application is 15 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 90 K Street NE, Washington, DC 20002.

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