



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

OMB CONTROL NUMBER: 1651-0093  
EXPIRATION DATE: 07/31/2027

**DECLARATION OF CONSIGNEE WHEN ENTRY IS MADE BY AN AGENT**  
19 CFR 141.19(B)(2)

If this declaration is made by an agent who does not present with the entry the declaration of the consignee, or who does not have proper authority to execute such declaration for this principal, bond must be given to produce such declaration in accordance with Section 485(c), Tariff Act of 1930.

*THIS DECLARATION MUST BE PRESENTED TO THE PORT DIRECTOR OF CBP AT THE PORT OF ENTRY WITHIN SIX MONTHS AFTER THE DATE OF THE BOND GIVEN THEREFORE, UNLESS AN EXTENSION OF TIME IS GRANTED BY THE PORT DIRECTOR.*

NAME OF CONSIGNEE (LAST, FIRST, MI)				ADDRESS (STREET, CITY, STATE, ZIP CODE)		
VESSEL/CARRIER ARRIVED FROM		NAME OF VESSEL/CARRIER			ENTRY NUMBER	DATE
NUMBER OF PACKAGES	SELLER OR SHIPPER	PLACE AND DATE OF INVOICE	AMOUNT PAID OR TO BE PAID IN FOREIGN CURRENCY	RATE OF EXCHANGE	ENTERED VALUE (FOREIGN CURRENCY)	ENTERED VALUE (U.S. DOLLARS)

**COMPLETE SECTION I, OR SECTION II, OR SECTION III (CHECK ONE) AND SECTION IV.**

<input type="checkbox"/> SECTION I		DECLARATION OF NOMINAL CONSIGNEE				
NAME OF OWNER (LAST, FIRST, MI)				ADDRESS (STREET, CITY, STATE, ZIP CODE)		

I, the undersigned, herewith declare that the consignee in whose name the entry covering the merchandise described herein was made, is not the actual owner of the said merchandise, but that such entry exhibits a full and complete account of all the merchandise imported in the vessel indicated therein by the above name person who is the actual owner for CBP purposes of the said merchandise except as listed below.

<input type="checkbox"/> SECTION II	DECLARATION OF CONSIGNEE FOR MERCHANDISE OBTAINED IN PURSUANCE OF A PURCHASE OR AGREEMENT TO PURCHASE
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I, the undersigned, representing the above name consignee, herewith declare that they are the consignees for CBP purposes of the merchandise described herein, that the entry covering the said merchandise exhibits a full and complete account of all the merchandise imported by them in the vessel indicated in the said entry and that the said merchandise was obtained by them in pursuance of a purchase or an agreement to purchase, except as listed below.

<input type="checkbox"/> SECTION III	DECLARATION OF CONSIGNEE FOR MERCHANDISE OBTAINED OTHERWISE THAN IN PURSUANCE OF A PURCHASE OR AGREEMENT TO PURCHASE
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I, the undersigned, representing the above name consignee, herewith declare that they are the consignees for CBP purposes of the merchandise described herein, that the entry covering the said merchandise exhibits a full and complete account of all the merchandise imported by them in the vessel indicated in the said entry and that the said merchandise was obtained by them in pursuance of a purchase or an agreement to purchase, except as listed below.

EXCEPTIONS (IF ANY)
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<input type="checkbox"/> SECTION IV	GENERAL DECLARATION
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I also declare, to the best of my knowledge and belief, that all statements appearing in the entry and in the invoice or invoices and other documents presented herewith and in accordance with which the entry is made, are true and correct in every respect; that the entry and invoices set forth the true prices, values, quantities, and all information as required by the law and the regulations made in pursuance thereof, that the invoices and other documents are in the same state as when received; that I have not received and do not know of any other invoices, paper, letter, document, or information showing a different currency, price, value, quantity, or description of the said merchandise, and that if at any time hereafter I discover any information showing a different state of facts, I will immediately make the same known to the port director of CBP at the port of entry.

SIGNATURE	ADDRESS	DATE
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TITLE (CHECK ONE)	
<input type="checkbox"/> PRINCIPAL <input type="checkbox"/> MEMBER OF THE FIRM <input type="checkbox"/> PRINCIPAL OFFICER OF THE CORPORATION: TITLE _____	
<input type="checkbox"/> AUTHORIZED AGENT	

**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 1651-0093. The estimated average time to complete this application is 6 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, 799 9th Street, NW., Washington DC 20002.

**Privacy Act Statement**

Pursuant to 5 U.S.C. § 552a (e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.

**Authority:**

U.S Customs and Border Protection (CBP) is authorized to collect the information requested on this form pursuant to 19 U.S.C. 1485, and provided for by 19 CFR 24.11 and 141.20.

**Purpose:**

CBP is requesting this collection of information to be used by CBP to ensure that additional duties are not imposed on the importer. The information on this form is used to validate an importer's claim for such duty allowances from the owner of imported merchandise.

**Routine Uses:**

The information requested on this form may be shared externally, as a "routine use" with appropriate federal, state, local, tribal, or foreign governmental agencies, or multilateral governmental organizations, to assist DHS in investigating or prosecuting the violations of, or for enforcing or implementing, a statute, rule, regulation, order, license, or treaty or when DHS determines that the information would assist in the enforcement of civil or criminal laws. A complete list of the routine uses can be found in the system of records notice associated with this form, "DHS/CBP-001 Import Information System." The Department's full list of system of records notices can be found on the Department's website at <http://www.dhs.gov/system-records-notices-sorns>.

**Consequences of Failure to Provide Information:**

Providing this information is voluntary. However, failure to provide the information will result in the claimant of record to be liable for any increased or additional duties, and agents would be unable to make it possible for entry and clear their clients merchandise.