GLOBAL INSPECTIONS GROUP

REQUEST FOR CERTIFICATION

Import Declaration Form Nr.

GIG Reference Nr.

Importer Particulars	Exporters Particulars
Contact Person: Tel/Cell: Fax: Email:	Contact Person: Tel/Cell: Fax: Email:
Inspection Site / Place of Inspection (Full Physical Address)	

Proforma Invoice Nr:	Invoice Date:	Value & Currency of Invoice

Description of Goods:	Party Responsible for Payment Exp ☐ Imp ☐ F/Forwarder ☐

Shipment Type	Total ☐ Partial ☐ Final ☐	Port of Shipment:

Shipment Method	Air ☐ Sea ☐ Rail ☐ Road ☐ Unknown ☐

Request for Inspection Date:	Date goods are available for Inspections:
Packing Method:	Estimated Date of Shipment of Goods:
FCL 20FT ☐ 40FT ☐	Bulk ☐ B/bulk ☐ Groupage ☐ Other ☐

Conditions of Goods			
New ☐	Used ☐	Assembled ☐	Disassembled ☐
Other ☐			Reconditioned ☐

Applicants Name:	GIG OFFICIAL USE ONLY *Name of CRE / LO*
Date:	C.R.E. ☐
Signature:	L.O ☐
	Name: Signature:

GLOBAL INSPECTIONS GROUP

DECLARATION FORM

Declared HS Code	Standard / Normative Ref:	Quantity / Unit	Product Description	Manufacturers Name / Brand	Registration /License Nr: