

Serial No:

Tł	RANSFER OF SH		5/ SPARES <u>(ex</u> CTION 110 O					<u>104(a</u>	a) of 1	the C	ustoms A	<u>Act)</u>	
			ENERAL INFO					NT					
1	Name of Shipping												
-	Freight Forwardi												
2	Address:	Tel No:					Fax No:						
	Email:												
3	No. of packages an of goods:					FOB Value (Rs):							
4	Date & Time of Operation:		Bill of Entry R80:						Date:				
				Bill of Entry R38:							Date:		
5	Type of Security: (<i>Tick as appropriate</i>)		Bank Guarantee :		Security		by Bond:		Cas	h Depo	osit:		
6	Security Reference any):	Security Reference Number (if any):											
7	Method of Transfer of goods: (Tick as appropriate)						companied or E escorted by Customs		Electronic Seal		Unaccompanied		
		PA	RT 2 – RELEAS	E AT	LANDING	5 STA	TION						
8	Place of Landing:	ce of Landing: Name of Supervisor at Landing Station: Signature:											
								Dat	e:				
			PART 3 – R	ELEAS	SE OF GO	ODS							
9	Customs Officer Endersoment				Agent/ Representative knowledgement of receipt of goods								
	Vehicle Reg. No.: Name & I.D No.		Time Out:	Remarks: Name & I.D No.:									
	Signature:			Signature:									
	Seal No. / E-Seal N Escort Officer (<i>if a</i>												
		PART 4 – CONT							CFS				
4.0		(For delaye	ed shipment, Part		<u> </u>	leted p	prior to Part 4	4)					
10	Vehicle Reg. No:			Tin	ne In:								
	Name:			I.D									
	Remarks: (<i>Tick as appropriate</i>)	Checked Seal / E-Seal	Checke Good		Accom	panieo ficer	-	Anoma observ	•		No Anom observe	-	
				• -									
	If any anomaly		v found, please provide details:										
		·····											
	Shipment Gate/ C	FS:							Signature & Date:				

PART 5 – RECEIPT OF SHIP'S SPARES BY CHCL FOR STORAGE AT MPA CARGO SHED3 or BY CUSTOMS OFFICER (BOARDING/WHARF) & DELIVERY FOR SHIPMENT

(This part is applicable only for ship's spares that have to be kept in the custody of CHCL or P.O pending shipment and needs to be completed by Agent Rep., CHCL Officer and/or Customs Officer as applicable prior to completion of PART 4 and PART 6)

completed by Ag	eni Kep., CHCL Ojji	cer una/or Customs C	officer as applicable	prior to completit	\mathcal{O}
1 RECEIPT	OF SHIP'S SPA	DELIVERY OF SHIP'S SPARES FOR SHIPMENT (Name, Signature & Date)			
CHCL Officer	· i/c of MPA			CHCL	
	Shed 3 (if applicable)			Officer (<i>if</i>	
			applicable) Gate Pass No. Agent Rep.		
					•
P.O (if applica	P.O (if applicable) Time In			P.O (if	
				applicable)	
Time In					
	PAR	T 6 – RECEIPT O	F GOODS FOR S	SHIPMENT	
2 Name of Vesso	Name of Vessel: Name of Master/ Authoris Officer:				Stamp:
					-
	Time In	Date			
Name of Airci	aft: Name of	•	Signa	ture:	
	Airline				
	Represe Agent: Time In:		ntative/		
			Date:		