

Rohlig USA, LLC

Import Compliance Questionnaire

Name of Importer: _____

Address: _____

City, State, Zip: _____

Contact Name: _____ Phone No.: _____

Email Address: _____ Fax No.: _____

Officers Authorized to sign POA: _____

Importer Number: _____ EIN Number: _____ SS Number: _____

Customs Assigned Number: _____

Bond Information: Bond Number: _____ Surety Code: _____

Amount: _____ Effective Date: _____

Do you have a Customs ACH? NO YES If yes, provide ACH Payment Number: _____

Description of merchandise: _____

Do you have an itemized USHTS Classification list?
 NO YES If yes, attach your list of established HTS#'s for all the articles imported with this completed form.

Country of Origin(s): _____

	YES	NO
1. Are you a first time importer?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you related to any suppliers of your merchandise?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is your merchandise legally marked with the country of origin and any other Marking requirements?	<input type="checkbox"/>	<input type="checkbox"/>
4. Is your merchandise subject to any other government agencies? Please check as appropriate. <input type="checkbox"/> FDA <input type="checkbox"/> EPA <input type="checkbox"/> FCC <input type="checkbox"/> DOT <input type="checkbox"/> ATF <input type="checkbox"/> CPSC <input type="checkbox"/> TSCA <input type="checkbox"/> F&W <input type="checkbox"/> Other _____		
5. Is your merchandise subject to any quota or countervailing duty and/or anti-dumping action?	<input type="checkbox"/>	<input type="checkbox"/>
6. Were the goods obtained pursuant to a purchase or agreement to purchase?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you pay any buying, selling, royalty commission(s)? Do you pay other indirect payment? Do you provide any materials/molds/tools/engineering work/plans or sketches not included in the purchase price on the import invoice?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8. Do your invoices reflect the actual price paid, correct quantity, description and country of origin of your imported merchandise?	<input type="checkbox"/>	<input type="checkbox"/>
9. Does your company export any foreign goods they import and pay duty on?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you have administrative rulings on your merchandise?	<input type="checkbox"/>	<input type="checkbox"/>
11. Does any of your merchandise qualify for reduced duty rates under: <input type="checkbox"/> GSP <input type="checkbox"/> CBI <input type="checkbox"/> NAFTA <input type="checkbox"/> Civil Aircraft <input type="checkbox"/> Andean Trade <input type="checkbox"/> US Goods Returned <input type="checkbox"/> US Goods Assembled or Repaired Abroad <input type="checkbox"/> FTA _____ <input type="checkbox"/> Other _____		
If your merchandise is US Goods Returned, are the goods the growth, production and manufacture of the United States and are they being returned without having been advanced in value? Also has no other drawback been claimed on the merchandise?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
12. Does your merchandise contain any unauthorized copyrighted or trademarked material?	<input type="checkbox"/>	<input type="checkbox"/>
13. Are you aware of your record keeping requirements of Customs Transactions?	<input type="checkbox"/>	<input type="checkbox"/>

Certification: I have completed this questionnaire to the best of my knowledge and ability. I understand that the information contained herein will be used to prepare Customs entries on behalf of our company. Declarations made in error based upon this information are the responsibility of the Importer of Record.

Signature _____ Title _____ Date _____