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| Continuous CBP Bond Application | Logo Roanoke Trade |
|  |  |
| CHB Name: | Customs Direct LLC | Imp No/Tax ID/SS #/CBP Assigned No: |       |
| Principal Name: |       |
| DBA: |       |
| Business Type:  | [x]  Corporation / [ ]  LLC (State of Incorporation: |       | ) | / [ ]  Partnership / [ ]  Proprietorship / [ ]  Individual  |
| If Partnership, indicate if:  | General  | [ ]  Add sheet with a complete listing of all partners |
|  |  | Limited  | [ ]  Attach a copy of the complete partnership agreement |
| If Proprietorship, indicate name of Sole Proprietor: |       |
| Co-Principals / Users: [ ]  Yes [x]  No (If yes, add sheet with Name, Imp No/Tax ID/SS #/CBP Assigned No and Address) |
| Physical Address: |       |
| City/State/Zip Code: |       |
| Mailing Address: |       |
| City/State/Zip Code: |       |
| Phone: |       |  Years in Business: |       |
| Activity Code:  | [x]  1 – Import (see below)  | [ ]  3a – Instruments of Intl Traffic | [ ]  14 – In-Bond Export Consolidation  |
|  | [ ]  1a – Drawback  | [ ]  4 – Foreign Trade Zone  | [ ]  15 – Intellectual Property Rights  |
|  | [ ]  2 – Custodial (see below) | [ ]  5 – Public Gauger  | [ ]  16 – ISF  |
|  | [ ]  3 – Intl Carrier (see below) | [ ]  11 – Airport Security (see below) | [ ]  17 – Marine Terminal Operator  |
| Bond Amount:  | 50,000.00 | Effective Date Requested: | TBD by CBP after term sent into CBP |
| Is a current bond on file (same activity code)? | [ ]  Yes | [x]  No |  |
| Has termination been sent on current bond? | [ ]  Yes | [x]  No | If yes, termination date: |       |
| Has any Surety ever suffered a loss on Principal’s behalf? | [ ]  Yes | [x]  No |
| Has Principal ever been placed on sanctions with CBP? | [ ]  Yes | [x]  No |
| For Activity Code 1 – Import Bonds only, please fill out below: |
| Description of merchandise to be imported: |       |  |
|  |       |  |
| Country(ies) of Origin:  | Various - China, Hungary, Italy, Great Britian, Netherlands |  |
| Is merchandise subject to antidumping/countervailing duties? | [ ]  Yes | [x]  No |
| Does the Importer require a Reconciliation Rider? | [ ]  Yes | [x]  No |
|  | **Previous 12 Months** | Estimated For Next 12 Months |
| Value of Merchandise:  |       |   |       |  |
| Estimated Duties, Taxes & Fees: |       |  |       |  |
| Number of Entries: |       |  |       |  |
|  |  |  |  |  |
| For Activity Code 2 – Custodial Bonds or Activity Code 3 – Intl Carrier Bonds only, please fill out below: |
| Activities to be conducted: |       |  |
| If a Carrier, provide SCAC: |       | If a Warehouse, Centralized Examination Station (CES), or Container Freight Station (CFS), provide FIRMS code: |       |  |
|  |  |  |  |  |
| For Airport Security only, please fill out below: |
| List Airport(s): |       |  |
|  |  |  |
| Certification |
| I certify that the factual information contained in this application is true and accurate and any information provided which is based upon estimates is based upon the best information available on the date of this application. |
|  |  |       |
| Signature of officer or attorney-in-fact |  | Date |
|       |  |
| Printed name and title |