



OZONE DEPLETING SUBSTANCES REGULATIONS 2010

FORM 10

DEPARTMENT OF ENVIRONMENT

IMPORT DECLARATION

(Sections 16 and 17 of the Act and Regulation 23)

TO: Fiji Islands Revenue Customs Authority at _____ port/airport
AND To:

Ozone Depleting Substances Unit,
GPO Box 2109, Suva, Fiji

This is to declare that a quantity of controlled substances is due to arrive at the above port/airport from
_____ (last port of call) at _____ (time) on _____ (date).

Flight no. or ship's name _____

Nature of the container/ equipment/ other
(tick as applicable)

Controlled Substances

Name	Quantity	Place of origin	Destination

Master/ Captain/ Customs agent/ Authorised supplier
(tick as applicable)

Contact details

Full name _____

Name of employer _____

Name and address of place of business _____

Residential address _____

Telephone Home _____
 Mobile _____

Work _____
Fax _____

E-mail address _____

Identity of the authorised supplier who will receive the consignment (if not the Declarant)

Declaration

I declare the above particulars to be accurate to the best of my knowledge and belief
I understand that a clearance fee of \$1 per kg is payable for the shipment.

Signed _____

Date _____
