



APPLICATION FOR CLIENT CODE

Fax to your local Customs Office (*Refer list of numbers overleaf*)

For Enquiries telephone: 0800 428 786

Te Mana Arai o Aotearoa

Applicant is a:

- Private Individual Company Sole Trader Partnership
- Importer Exporter Other

Full Name of Applicant:

..... Date of Birth:

..... Date of Birth:

..... Date of Birth:

- Note: 1. "Limited" and company registration number must be shown where applicable. Copy of Certificate of Incorporation required as verification.
2. Full trading name and full names of all partners required for sole trader/partnerships.
3. Date of birth must be shown for private individuals/partnerships/sole traders. Copy of Drivers licence, Birth Certificate or Passport required as ID. For partnerships a copy of Partnership Agreement or copy of ID required for all partners.

IRD/GST Number: Company Registration Number:

Passport Number & Nationality:

Full Street Address: Full Postal Address:

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.....

Phone Number: Fax Number:

Contact Person:

Goods Imported:

Signed:

(Note: For Partnerships all signatures required)

To be completed if using a Customs Broker

I,,
Full Name of signatory (above) *Title*

hereby authorise the New Zealand Customs Service to advise DCB International
of the client code allocated to me. *Broker*

Contact Person Michael Stewart.. .. . Brokers Fax: 03 4775753

For Customs Use

The New/Existing code is:

Customs Officer:

Date:

IMPORTANT: Please retain this code for future use.