

1.6 Name of Contact Person:

Tel No:

Mobile No:

E-mail:

Fax No.:

1.7 Office Contact

Tel No:

Fax No.:

E-mail:

Website Address:

1.8 Main Type of Goods Manufactured during the calendar year:

S/No	HS Code	Product Description	Total Sales Value of Products in Ksh:
i.			
ii.			
iii.			
iv.			
TOTAL COST IN Ksh:			

(Continue on a separate sheet if required)

1.9 Main Type of Machinery used by the Manufacturer during the calendar year:

S/No	HS Code	Machine Description	Usual Country of Origin	Actual/Estimated Cost of Replacement of Industrial Spares in Ksh:	
				Actual cost for previous year	Estimate cost for current year
i.					
ii.					
iii.					
iv.					
TOTAL COST IN Ksh:					

(Continue on a separate sheet if required)

1.10 Any other relevant information

Kindly attach certified copies of the following documents:-

- (i) **Certificate of Incorporation**
- (ii) **Company PIN Certificate**
- (iii) **Current valid tax compliance certificate**

I solemnly declare that all the information provided in support of this application is true and correct to the best of my knowledge

Name of Applicant

Designation

Signature and Official Stamp

FOR OFFICE USE ONLY

Recommended/Not Recommended: _____	Verified by: _____
Chairman - Vetting Committee: _____	Secretary - Vetting Committee: _____
Date and Stamp: _____	Date and Stamp: _____
<hr style="border-top: 1px dashed black;"/>	
Approved/Not Approved: _____	

COMMISSIONER FOR CUSTOMS SERVICES

Date and Stamp