

Continuous Bond Application

CHB Name: _____

Importer Name: _____

Importer Number: _____

DBA: _____

Corporation (State of Incorporation: _____) / Partnership / Proprietorship / Individual

If Partnership, indicate if General or Limited

If Proprietorship, indicate name of Sole Proprietor: _____

Co-Principals / Users: Yes No (If yes, add sheet with Name, Importer Number, Address)

Physical Address: _____

City/State/Zip Code: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Years in Business: _____

Activity Code: 1 1A 2 3 3A 4 5 16 Bond Amount Requested: _____

Effective Date Requested: _____ (Note: CBP requires at least 15 days to file a bond.)

For Activity Code 1 – Import Bonds Only – CBP 301 form, please fill out below:

Description of merchandise to be imported: _____

Country(ies) of Origin: _____

Is merchandise subject to antidumping/countervailing duties? Yes No

Is a current bond on file (same activity code)? Yes No

Has termination been sent on current bond? Yes No

If yes, termination date: _____

Is the Importer on Periodic Monthly Statement? Yes No

Does the Importer require a Reconciliation Rider? Yes No

Has any Surety ever suffered a loss on Principal's behalf? Yes No

Previous Calendar Year

Estimated For Next Calendar Year

Value of Merchandise: _____

Estimated Duties: _____

Number of Entries: _____

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