

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

FORM APPROVED OMB NO. 1651-0014 Exp. 06-30-2016

**DECLARATION FOR FREE ENTRY
OF UNACCOMPANIED ARTICLES**

19 CFR 148.6, 148.52, 148.53, 148.77

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0014. The estimated average time to complete this application is 45 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.

PART I -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Please consult with the CBP official for additional information or assistance. REMEMBER--All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle) <i>Your Name</i>	2. IMPORTER'S DATE OF BIRTH <i>you D.O.B</i>	3. IMPORTER'S DATE OF ARRIVAL <i>your date of arrival</i>
4. IMPORTER'S U.S. ADDRESS	5. IMPORTER'S PORT OF ARRIVAL <i>where you arrived in the USA</i>	
	6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN <i>your flight number.</i>	
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.)		

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE <i>Leave Blank</i>	B. NAME OF VESSEL/CARRIER <i>Blank</i>	C. FROM (Country)	D. B/L OR AWB OR I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS <i>Leave Blank</i>	F. MARKS AND NUMBERS			

PART II -- TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES

9. RESIDENCY ("X" appropriate box) I declare that my place of residence abroad <input type="checkbox"/> is <input checked="" type="checkbox"/> was	A. NAME OF COUNTRY <i>UK</i>	B. LENGTH OF TIME <i>you</i> Yr. <i>how long</i> lived <i>in</i> Mo. <i>the UK</i>
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input type="checkbox"/> (1) Returning resident of the U.S. (2) Nonresident: <input checked="" type="checkbox"/> <i>X which applies to you</i>	<input type="checkbox"/> a. Emigrating to the U.S.	<input type="checkbox"/> b. Visiting the U.S.
10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES I the undersigned further declare that ("X" all applicable items and submit packing list) :		
A. Applicable to RESIDENT and NONRESIDENT <input checked="" type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA) <input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA)		
B. Applicable to RESIDENT ONLY <i>X if applies to you</i> <input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)		
C. Applicable to NONRESIDENT ONLY <i>X if applies to you</i> <input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA) <input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)		

PART III -- TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States; and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S. <i>Leave Blank</i>	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON: <i>Leave Blank</i>
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PART IV -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item D on the reverse.)

A. For U.S. Personnel, Evacuees, Residents and Non-Residents <input type="checkbox"/> (1) Articles for the account of other person. <input type="checkbox"/> (2) Articles for sale or commercial use. <input type="checkbox"/> (3) Firearms and/or ammunition. <input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products. <input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds. <input type="checkbox"/> (6) Fish, wildlife, animal products thereof.		B. For Residents and Non-Residents ONLY <input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year. <input checked="" type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.	
C. For Resident ONLY <input checked="" type="checkbox"/> (9) Personal effects acquired abroad. <input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP. <input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.			

D. LIST OF ARTICLES

(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OF COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP: State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to CBP.
	Leave Blank as you will have an attached Inventory		

PART V -- CARRIER'S CERTIFICATE AND RELEASE ORDER

The undersigned carrier, to whom of upon whose order the articles described in PART I, 8., must be released, hereby certifies that the person named in Part I, 1., is the owner or consignee of such articles within the purview of section 484(h), Tariff Act of 1930.

In accordance with provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.

1. NAME OF CARRIER Leave Blank	2. SIGNATURE OF AGENT (Print and sign) _____ Date _____
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PART VI -- CERTIFICATION TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY

I, the undersigned, certify that this declaration is correct and complete.

1. "X" One

- A. Authorized Agent* (From facts obtained from the importer) B. Importer

2. SIGNATURE * SIGN HERE *	3. DATE DATE
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*An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.19, 141.32, 141.33).

PART VII -- CBP USE ONLY (Inspected and Released)	1. SIGNATURE OF CBP OFFICIAL Leave Blank	2. DATE _____
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U.S. CUSTOMS SERVICE

**SUPPLEMENTAL DECLARATION FOR
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS**

1. OWNER OF HOUSEHOLD GOODS (Last name, first, and middle) *Your name*

2. DATE OF BIRTH *Your date of birth* 3. CITIZENSHIP *Your citizenship*

4. PASSPORT (Country and number) *Your passport # & country of issue*

5. SOCIAL SECURITY NUMBER *List if you have one* 6. RESIDENT ALIEN NO. *List if you have one.*

7. U.S. ADDRESS *Your US Address* 10. EMPLOYER *Who employs you in the US (if unemployed leave Blank)*

8. FOREIGN ADDRESS *Your UK address* 11. POSITION WITH COMPANY *Blank*

9. REASON FOR MOVING *Why are you moving to the USA.* 12. LENGTH OF EMPLOYMENT

13. NATURE OF BUSINESS

14. WHO CAN VERIFY ABOVE INFORMATION *NAME AND TELEPHONE OF COMPANY OFFICIAL*

15. NAME AND ADDRESS OF FREIGHT FORWARDERS, PACKERS AND SHIPPING AGENTS *Leave Blank*

SHIPMENT ITINERARY

16. PACKERS AND SHIPPING AGENTS *Leave Blank*

17. CERTIFICATION A. Authorization Agent B. Importer (check one)

18. SIGNATURE ** SIGN HERE **

CUSTOMS POWER OF ATTORNEY

- Individual
Partnership
Corporation
Sole Proprietorship
Limited Liability Company

SS /FEIN#: _____

KNOW ALL MEN BY THESE PRESENTS: that, Your name, doing
(Full name of individual, partnership, corporation, sole proprietorship, or limited liability company) (identity)

business as a Individual under the laws of the State of
(Individual, partnership, corporation, sole proprietorship, or limited liability company) (insert one)

residing or having a place of business at your US address, hereby constitutes and

appoints Leave Blank, it officers, employees, and/or specifically authorized agents, to act for
and on its behalf as a true and lawful agent and attorney of the grantor for and in the name, place and stead of said grantor, from this date, in the United
States (the territory), either in writing, electronically or by other authorized means, to:

To make, endorse, sign, declare or swear to any customs entry, withdrawal, declaration, certificate, bill of lading, carnet or other document required by
law or regulation in connection with the importation, exportation transportation, of any merchandise, in or through the customs territory, shipped or
consigned by or to said grantor; Perform any act or condition which may be required by law or regulation in connection with such merchandise
deliverable to said grantor; to receive merchandise; Make endorsement on bills of lading conferring authority to transfer title, make entry or collect
drawback, and to make, sign, declare or swear to any statement or certificate required by law or regulation for drawback purposes, regardless of whether
such document is intended for filing with Customs; Sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in
connection with the entry or withdrawal of imported merchandise or merchandise exported with or without the benefit of drawback, or in connection with
the entry, clearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds
which may be voluntarily given and accepted under applicable laws and regulations, consignee's and owners declarations provided for in Section 485,
Tariff Act of 1930, as amended, or affidavits in connection with the entry of merchandise; Sign and swear to any document and to perform any act that
may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading or operation of any vessel or other means of
conveyance owned or operated by said grantor; Authorize other Customs Brokers duly licensed with the territory, to act as grantor's agent; to receive,
endorse and collect checks issued for Customs duty refunds in the grantor's name drawn on the Treasurer of the United States; if the grantor is a non-
resident of the United States, to accept service of process on behalf of the grantor;

And generally to transact Customs business, including filing of claims or protests under section 514 of the Tariff Act of 1930, or pursuant to other laws of
the territories, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney;
Giving to said agent and attorney full power and authority to do anything whatever requisite necessary to be done in the premises as fully as said grantor
could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents;
This power of attorney to remain in full force and effect until revocation in writing is duly given and received by grantee (if the donor of this power of
attorney is a partnership, the said power of attorney shall in no case have any force or effect in the United States after the expiration of 2 years from the
date of its execution.);

If the Grantor is a Limited Liability Company, the signatory certifies that he/she has full authority to execute this power on behalf of the Grantor.

IN WITNESS WHEREOF, THE SAID Your name
(Full name of Company)
caused these presents to be sealed and signed: (Signature) * Sign Here *

(Capacity) N/A Date: The Date

Witness:(If Required) N/A

If you are the importer of record, payment to the broker will not relieve you of liability for Customs charges (duties, taxes, or their debts owed to
Customs) in the event the charges are not paid by the broker. Therefore, if you pay by check, Customs charges may be paid with a separate check
payable to the "U. S. Customs Service" which shall be delivered to Customs by the broker. Importers who wish to utilize this procedure must