Completing the USCF 3299, Supplemental Declaration & Power of Attorney

<u>3299 customs form</u> Part I:	
	Importers name (yourself)
	Importers (your) date of birth
Box 3	Importers (your) date of arrival into United States (note: You must have
	entered U.S. in order to obtain clearance, therefore plan to arrive before your
	goods)
Box 4	Importers US address (Non-Resident: this can be a tempory or business
	address) (Resident: If a permanent address is not yet available list a relatives
	address or previous address prior to departure from U.S.) US customs will check
	these addresses.
	Importers port of arrival (Name of airport you cleared customs in U.S.)
Box 6	Name of vessel/carrier (Airline or shipping line) Give flight or vessel number if
	known.)
	Name(s) of accompanying household members (Spouse, Child etc.)
Box 8	Leave blank for shipper/agent to complete
Part II:	
Box 9	Residency (if entering on a tempory basis, put X in box " is "; if assuming US
	residency, put X in box "was") A List name of country abroad you have been
	living/or live and \mathbf{B} length of time at that address. \mathbf{C} put X in appropriate box(s).
10	Statement(S) of eligility for free entry of articles (put x in apprropriate
	boxes, do not fill in box C.(2)
Part III:	Leave blank
Part IV:	Put ${f X}$ in apprropriate boxes. Ensure you understand the terms "household goods"
	and "personal effects"
Section A	Items listed (1) , (2) , (3^*) , (5) , (6^*) should not be in your shipment. (3^*) Can
	only be shipped after US government authorisation from both the US and UK.
	(6*) Some may be shipped if export licence obtained. Item (4) If shipping alcohol
	duty will be applicable, full list must be shown in Section D. Some states do not
	permit alcohol
Section D	List any new articles (those less than 12 months old) and any liquor/spirits
Part V:	Leave blank
Part VI:	Section 1 put X in box b, Section 2 & 3 Your signiture and date of signing
3299 supplemental declaration	
-	Full name
2	Date of birth
	Passport number and country of issue
	Social security number and or
	Resident alien number
	US and foreign address
	Reasons for moving (job assignment, marriage, repatriating etc)
	Employer information
	Leave blank for agent to fill in.
	Leave blank for shipper or agent to fill in.
	Tick box 'a'
	Importers signiture

Please leave the top line blank, for time being. Please fill in fully the remainder of the form.