

U.S. CUSTOMS & BORDER PROTECTION
SUPPLEMENTAL DECLARATION
FOR
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

1 Owner of Household Goods

(Last Name, First and Middle): _____

2 Date of Birth: _____

8 Citizenship: _____

3 Passport: _____

9 Resident Alien No: _____

4 Social Security No: _____

10 Employer _____

5 U.S. Address: _____

11 Position with Company _____

6 Foreign Address: _____

12 Length of Employment _____

7 Reason for Moving: _____

13 Nature of Business _____

14 Name & Telephone of Company Official

Who can verify above: _____

15 Name & Address of Freight Forwarders, Packers, & Shipping Agents: _____

16 Shipment Itinerary: (Specify Place of Lading): _____

17 Certification (Check one):

Authorized Agent

Importer

18 Signature: _____

Date: _____