



Customs remission

When to use this form

Use this form if you are entitled to apply for a remission of customs duty payable on goods that have not been delivered into home consumption.

Filling in your form

- Fill in the form by typing straight into the boxes provided.
- Make sure you answer all questions marked with an *.
- Once you've completed the form, you can save or print it by selecting the buttons at the end of the form.

For help filling in this form, refer to the [instructions](#) or phone us on **1300 137 290**.

Owner details

Who is the owner?

Name* (legal name of the owner of the goods)

Australian business number (ABN)

Client account number

 While it is not compulsory to provide your ABN, it will help us process your application promptly.

Contact details

Who do you nominate as the person for us to contact if we need more information about this application?

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given name or names

Position held

Business phone

Mobile

Business email address

Product details

Provide information about the goods that will not be delivered into home consumption.

Customs tariff item*

. .

Product description*

Quantity in dutiable units*

Units*

Duty rate*

Ad valorem

Remission value*

\$

Import declaration number*

Claim code*

Describe the reason for destruction*

Destruction method*

Customs tariff item

. .

Product description

Quantity in dutiable units

Units

Duty rate

Ad valorem

Remission value

\$

Import declaration number

Claim code

Describe the reason for destruction

Destruction method

Customs tariff item

. .

Product description

Quantity in dutiable units

Units

Duty rate

Ad valorem

Remission value
\$

Import declaration number

Claim code

Describe the reason for destruction

Destruction method

Customs tariff item

. .

Product description

Quantity in dutiable units

Units

Duty rate

Ad valorem

Remission value
\$

Import declaration number

Claim code

Describe the reason for destruction

Destruction method

Total product lines

Number of product lines completed:

Remission summary

Total remission value*

\$

 You may be required to provide additional information to support your claim.

Premises details

Provide information about the premises where the goods are currently stored.

Establishment ID* (alpha numeric)

Name of the establishment*

Establishment address


Street number and name*

Suburb/town/locality*

State/territory*

Postcode*

Destruction of goods

 You should not destroy the goods until you have permission.

Will the goods be destroyed at the premises they are currently stored at?*

Yes When do you intend to destroy the goods?*

Start date / /

End date / /

No Establishment ID of destruction facility (if licensed)

Name of destruction facility*

Address of destruction facility

Street number and name*

Suburb/town/locality*


State/territory*

Postcode*

When do you intend to move the goods for destruction?*

Start date / /

End date / /

 You may need to supply evidence that the destruction facility will accept the goods for destruction.

Declaration

Privacy

We are authorised under the *Customs Act 1901* and the *Customs Regulation 2015* to collect the information we request on this application. The information will help us to administer the customs laws. This information provided may be disclosed to the Department of Home Affairs and Australian Bureau of Statistics.

If you are applying on your own behalf

I declare that the information provided in this document is true and correct.

If you are an agent

- *I have prepared this document in accordance with the information supplied by the entity.*
- *I have received a declaration from the entity stating that the information provided to me is true and correct.*

Name*

Position held*

Business phone*

Business email address

Sign and date below if you are sending by mail*

Date

Day / Month / Year
 / /

Lodging your application

Keep a copy of your completed application form for your records. Lodge the original including any attachments through:

- secure mail in [Online services for business](#)
- practice mail in [Online services for agents](#)
- mail to

Australian Taxation Office
PO Box 3514
ALBURY NSW 2640