## **CUSTOMS AND EXCISE MANAGMENT REGULATIONS 2008**

## **Regulation 13(2)**

## Form C7 - Request for Landing Certificate

| TRANPORT DETAILS                                |                           | _              |                      |                       |       |
|---|---------------------------|----------------|----------------------|-----------------------|-------|
| Port of Last Departure                          |                           |                |                      |                       |       |
| Point of Entry                                  |                           |                |                      |                       |       |
| Ship Name or Carrier                            |                           |                |                      |                       |       |
| Voyage No. or Flight No.                        |                           |                |                      |                       |       |
| Ship or Flight Arrival/Departure* Date and Time |                           |                |                      |                       |       |
| Net Tonnage                                     |                           |                |                      |                       |       |
| Nationality or Port of Registry                 |                           |                |                      |                       |       |
| CARGO AND PERSON DETAILS<br>LIST                |                           | ATTACHE        | D SHEETS OF INF      | ORMATION              |       |
| Cargo Landed in Tonga (Form C4)                 |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
| MASTER / AGENT DETAILS                          |                           |                |                      |                       |       |
| Master  |                           |                |                      |                       |       |
| Agent Entity                                    |                           |                |                      |                       |       |
| Contact Person                                  |                           |                |                      |                       |       |
| Contact Number                                  |                           |                |                      |                       |       |
| Contact Email                                   |                           |                |                      |                       |       |
|   | '                         | ,              |                      |                       |       |
|   |                           |                |                      |                       |       |
| I was wast that the goods listed in the att     |                           | CLARATIO       |                      | 1 / Aimonoft * listed | hove  |
| I request that the goods listed in the atta     | actied sheet(s) be record | led as failded | cargo from the vesse | 17 All Craft · listed | 10016 |
| Master or Agen                                  | Dated                     |                |                      |                       |       |
|   |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
| Accepted  | Date                      |                | TCS Off              | icer Name Printed     |       |
|   |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
| * = delete whichever is inapplicable            |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |
|   |                           |                |                      |                       |       |