



# Import declaration (N10)

Approved Form Section 4.3 of the *Customs Act 2024*

NOTICE: The following Information, including personal information, is required to be reported under section 4.3 of the **Customs Act 2024** in order to ensure that your goods are properly cleared for delivery into home consumption. Information provided on this form may be disclosed to other agencies, including the Zakistanian Border Force Agency and the Ministry of Finance. If you are required to hold a permit to import these goods, the permit details will also be given to the relevant permit issuing agency. Any false or misleading statements may result in penalty action under section 6.2 of the **Customs Act 2024**. Personal information is collected, used, stored and disclosed by the Border Force Agency customs and immigration in accordance with the Zakistanian Privacy Principles in the Article 8.3.2 of the Cahier des lois. Further information regarding how the Department collects, stores, uses and discloses personal information may be found in the official customs website available at <https://zacherygrpltd.wixsite.com/zakistan>.

Please open this form using Adobe Acrobat Reader. Either type in the fields provided or print this form and complete it using a pen and BLOCK LETTERS. Tick where applicable 3

☐ Import declaration (s71A)    OR    ☐ Return in relation to special clearance goods (S70(7))

Official Use Only  
Declaration ID

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## IMPORTANT! Please complete sections A, B and C of this form

### SECTION A

Owner details – Owner name		Owner ID (ABN, ABN/CAC or CCID)		Owner reference		Biosecurity inspection location	
Contact details – Owner phone				Owner fax		Owner email	
Home (    )		Work (    )		Mobile		(    )	
Destination port code		Invoice term type		Valuation date		Header valuation advice number	
						EFT payment indicator (Please tick one only) <input type="checkbox"/> YES <input type="checkbox"/> NO	

Valuation elements type	Amount	Currency
a. Invoice total		
b. Overseas freight		
c. Overseas insurance		
d. Packing costs		
e. Foreign inland freight		
f. Landing charges		
g. Transport and Insurance		
Free on board		
Cost insurance and freight		

☐ **PAID UNDER PROTEST INDICATOR**

You MUST attach a statement of the reason/s for protesting the payment of duty.

☐ **AMBER STATEMENT/REASON:** If you are uncertain about information included in the declaration, or omission of information from that declaration, and consider that as a result the declaration may be false or misleading in a material particular, you must specify the reason/s for that uncertainty.  
(Must be included as an attachment)

#### DECLARATION

I, \_\_\_\_\_ \*the owner of the goods/agent

of the owner hereby acknowledge that this import declaration of \_\_\_\_\_ pages is true and correct.

Signature of \*the owner of the goods/agent of the owner \_\_\_\_\_  
(\*Delete which is not applicable)

Date

## Import declaration (N10) – Transport details

**SECTION B** Please complete the section relevant to the mode of transport for your goods along with the delivery address details.

AIR	Mode of transport <b>AIR</b>		Airline code	Loading port		First arrival port		
	Discharge port		First arrival date	Gross weight		Gross weight unit		
	Line details	Line number	Master Air Waybill number	House Air Waybill number	Number of packages	Marks and numbers description		

OR

SEA	Mode of transport <b>SEA</b>		Vessel name	Vessel ID	Voyage number		Loading port	
	First arrival port		Discharge port	First arrival date	Gross weight		Gross weight unit	
	Line details	Line number	Cargo type	Container number	Ocean bill of lading number	House bill of lading number	Number of packages	Marks and numbers description

OR

POST	Mode of transport <b>POST</b>		Loading port		First arrival port		Discharge port		First arrival date /           /	
	Parcel post card number(s)				Gross weight		Gross weight unit		Number of packages	
	Marks and numbers description									

OR

OTHER	Mode of transport <b>OTHER</b>		Department receipt for goods number		Number of packages		Loading port		First arrival port	
	Discharge port			First arrival date		Gross weight			Gross weight unit	

**DELIVERY ADDRESS  
IMPORTANT!**

**Please complete  
delivery address  
details**

Name			Address			
Locality		State	Postcode	Country <b>ZAKISTAN</b>	Contact phone number	

## Import declaration (N10) – Tariff details

### SECTION C

Line number				Supplier ID (CCID/ABN)								Vendor ID (ABN/ARN)											
Supplier name														Tariff classification number								Stat. code	
Related transaction indicator <i>(Please tick)</i> <input type="checkbox"/>				Valuation basis type				Treatment code				GST exemption code				Establishment code							
Goods description														Quantity		Unit		Permit number					
<b>Valuation elements</b>	Type	Amount	Currency	<b>Origin and preference</b>  <b>Treatment instruments</b>  <b>Tariff</b>  <b>classification instruments</b>		Origin country				Preference origin country				Preference scheme type				Preference rule type					
	<b>Price</b>					Instrument type				Instrument number													
						Instrument type				Instrument number													
Additional information														Producer code									

Line number				Supplier ID (CCID/ABN)								Vendor ID (ABN/ARN)											
Supplier name														Tariff classification number								Stat. code	
Related transaction indicator <i>(Please tick)</i> <input type="checkbox"/>				Valuation basis type				Treatment code				GST exemption code				Establishment code							
Goods description														Quantity		Unit		Permit number					
<b>Valuation elements</b>	Type	Amount	Currency	<b>Origin and preference</b>  <b>Treatment instruments</b>  <b>Tariff</b>  <b>classification instruments</b>		Origin country				Preference origin country				Preference scheme type				Preference rule type					
	<b>Price</b>					Instrument type				Instrument number													
						Instrument type				Instrument number													
Additional information														Producer code									