

INTERNAL REVIEW APPEAL FORM

Request for review by the Internal Review Committee

Name of Importer:				
Importer Telephone:				
Importer Email Address:				
Importer Mailing Address:				
I TONI				
Importer's TRN:				
Name of Representatives:				
(If the importer is a				
company)				
Customs Broker Name:				
Customs Broker Number:				
Customs Broker Contact Details:				
Telephone, Email Address and Mailing				
Address				
Customs Broker Telephone:				
Customs Broker Email Address:				
Customs Broker Mailing Address:				
Reference Document (s)				
Import Entry Number:				
Internal Number:				
Unit Referred:				
Reasons (s) for Appeal:	,			



List of Additional evidence supplied by the Importer, please indicate by a tick (for internal use only)

Wire Transfer				
Sale or purchase agreement				
Invoices				
Labour cost				
Contractual agreement				
Salvages (parts invoice and laborated salvages)	our cost)			
Correspondence				
Receipts				
Other (to include information/d	ocumentation			
received from JCA)				
Is the shipment on the port?	Yes	No 🗆		
Details of Shipment				
Type of Shipment	_			
Commercial Personal P				
Type of Goods				
Signature of Appellant:		Date:		
		•		
Unit's Internal Reference No:	Date Rec	eived:	Time Received:	