



CUSTOMS BROKER APPLICATION

GENERAL INFORMATION																
Full Legal Company Name:						DBA (if any):										
Contact First Name:				Contact Last Name:												
Contact Title:						Email:										
Physical Address:						City:		State:		Zip:						
Phone Number:				Fax Number:		Website:										
Years in Business:		<input type="checkbox"/> Less than 1 year		<input type="checkbox"/> Corporation, State of:		<input type="checkbox"/> LLC		<input type="checkbox"/> Partnership		<input type="checkbox"/> Individual		Other:				
Federal Tax ID or SS#:			Publicly held Corp: <input type="checkbox"/> Yes <input type="checkbox"/> No			# of Owners, Partners or Members:										
Number of Offices:		Filer Code:		Primary Port of Entry:		ABI program used:										
Bond Type: (check all that apply)																
Continuous Importer/Broker (C1)				<input type="checkbox"/> Yes <input type="checkbox"/> No		Foreign Trade Zone Operator (C4)				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Drawback (C1a)				<input type="checkbox"/> Yes <input type="checkbox"/> No		Anti-Dumping				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Custodial Warehouse (C2)				<input type="checkbox"/> Yes <input type="checkbox"/> No		ISF				<input type="checkbox"/> Yes <input type="checkbox"/> No						
International Carrier (C3)				<input type="checkbox"/> Yes <input type="checkbox"/> No		Carnet				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Instruments of Int'l Traffic (C3a)				<input type="checkbox"/> Yes <input type="checkbox"/> No		Other? Explain:										
Credit Procedures:																
Do you run credit reports for your new Importers?				<input type="checkbox"/> Yes <input type="checkbox"/> No		Do you extend Credit?				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Do you require new Importers to complete an application?				<input type="checkbox"/> Yes <input type="checkbox"/> No		Do you handle Custom Referrals?				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Do you collect Importer Financial Statements?				<input type="checkbox"/> Yes <input type="checkbox"/> No		Do you do clearance under Brokers Bond?				<input type="checkbox"/> Yes <input type="checkbox"/> No						
Number of Single Transactions currently issuing:				Number of Continuous Bonds currently issuing:												
Projected number of Single Transactions per month:				Projected number of Continuous Bonds per month:												
Bond Types on a percentage basis:																
General Merchandise		%	FDA		%	Textile		%	TIB		%	Auto	%	Other		%
List Commodities Imported:																
List Countries Imported from:																
Current Single Transaction Bond rate:				Current Continuous Bond rate:				Current Broker/Surety:								
CLAIMS HISTORY																
Year	Number of Claims				Total paid out											
There may be additional financial risk your company faces, please indicate any other coverages you may be interested in:																

APPLICANT ACKNOWLEDGEMENT & SIGNATURE

By signing below, you are acknowledging that you have completed this application with statements and information that are true and accurate within the scope of your knowledge, and you understand that we will only be able to offer a quotation when all the applicable sections are completed and any additional requested items are received.

California Law requires us to notify you of the following: Any person, who with intent to defraud or knowingly facilitates a fraud against an insurer, applies or files a claim containing a false or deceptive statement, is guilty of insurance fraud; criminal and civil penalties varying in degree by state.

Name: _____

Title: _____

Date: _____

Signature of Applicant: _____