# **U.S.A.** Customs Clearance Documents

The attached set of documents consists of three different forms. First of all, separate the three forms, and then carefully fill them in, paying attention to the notes given below. If you do not fully complete these forms, your goods will not clear Customs, and you may be charged for storage at destination.

### **Power of Attorney**

This form empowers the destination agent to act for you as Customs broker, and to make statements and Customs entries on your behalf. (See also note at bottom of section on completing Customs form 3299).

- Please complete the sections marked (X).
- Leave blank the spaces for naming the Customs broker, Customs district and duration of the validity of the form. These details will be entered by the destination agent.
- Don't forget to sign, date, and have the form witnessed.

#### **Customs form 3299**

This form is your declaration requesting free entry of your personal effects. The form may seem complicated to begin with, but if you take your time and follow these instructions, you will find it fairly simple to complete. The form is divided into seven sections, numbered Part I through to Part VII.

- Part I Complete boxes 1 to 7. It is important that you fill boxes 3 (date you arrived/will arrive); 5 (airport or place where you arrived/will arrive); and 6 (airline and flight number) correctly. The information you put in these boxes refers to your own arrival, not the arrival of your goods. Box 8 sections A to F refers to the arrival of your goods. As you will not have the necessary information to complete this part, you may leave Box 8 sections A to F blank for the destination agent to complete.
- Part II Fill in Box 9, putting an 'X' in the check-box against 'is' if you are moving temporarily to the US, or in the check-box against 'was' if you are moving permanently. Fill in the boxes marked A (name of country); B (length of time); and C (Residency status on arrival) with the relevant information. In Box 10, note that residents of the U.S. should complete parts A and B; non-residents should complete parts A and C. Put an 'X' in each applicable check-box.
- Part III This part applies only to 'US Personnel and Evacuees.' Complete it only if you are a member of the US Military or a US Government employee, moving on US Government orders. Otherwise, leave this part blank.
- Part IV Section A applies to all importers. If you have any of the items listed by check-boxes 1 to 6, please put an 'X' in the appropriate box. US residents then go on to enter an 'X' against each applicable check-box in sections B and C. Importers who are non-residents must complete section B, but not section C. Turn the page now to section D where you list any items that you indicated to be in your shipment in sections A, B, or C. It is not necessary to list here any items which you have owned and used for over a year, as long as these items are detailed on your packing list (for owner-packed shipments) or on your inventory (for household removals).
- Part V The destination agent will complete the 'Name of carrier' and 'Signature of Agent' boxes
- Part VI Put an 'X' in the 'Importer' check box, sign the form in box 2, and date it in box 3.
- Part VII Leave blank. This is for Customs' use only.

Note: You may notice that at the bottom of part VI, it is stated that an 'Authorised agent' may complete the form. This is why it is important that you complete the first form, the Power of Attorney. In completing the Power of Attorney, you empower the destination agent to complete any parts you may have missed or filled in incorrectly, using information received from you by mail, fax or telephone.

## **Treasury Department Supplemental Declaration**

On this form, you give details of your passport number, Social security number (if applicable) and brief details of your reason for moving to the United States.

- Enter the correct information in each section. You may leave blank section 16 (Shipment itinerary) the destination agent will have the information to complete this section. Enter 'N/A' if due to your circumstances a particular section is not applicable to you or your shipment.
- Ensure that you sign the form.

You must now attach to these documents a <u>passport photocopy</u>, specifically the page with your picture and personal details, and the page with your US Visa (if applicable). You must also complete and attach a <u>packing list</u> (for owner-packed shipments), <u>or a numbered inventory</u> which the packers will complete if yours is a professionally-packed household removal.

## POWER OF ATTORNEY - to clear my personal effects shipment through U.S. Customs

Section 141.5, Title 19, United States Code of Federal Regulations requires a Customs House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

To expedite clearance of your shipment and to comply with U.S. Customs regulations, please complete the information as requested below (X).

KNOW ALL MEN BY THESE PRESENTS:	That, (X) Gilad Jonathan Yogev
	(Full name of Shipper)
Residing at (X) 1163 SE Goodnight Ave, Corvallis,	Dregon
(U.S. Address)	
hereby constitutes and appoints the following	Customs House Broker:
date and in all Customs Districts, and in no or declaration, certificate, bill of lading, carnet of transportation, or exportation of any merchan	grantor named above for and in the name, place, And stead of said grantor from this her name, to make, endorse, sign, declare, or swear to any entry, withdrawal, r other document required by law or regulation in connection with the importation, lise shipped or consigned by or to said grantor; to perform any act or condition a connection with such merchandise; to receive any merchandise deliverable to said
declare, or swear to any statement, supplement manufacture, certificate of manufacture and dentry, declaration of exporter on drawback er	terring authority to transfer title, make entry or collect drawback, and to make, sign, tal statement, schedule, supplemental schedule, certificate of delivery, certificate of elivery, abstract of manufacturing records, declaration of proprietor on drawback try, or any other affidavit or document which may be required by law or regulation such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or ng in any customs district;
withdrawal of imported merchandise or merc entry, clearance, lading, unlading or navigation and any and all bonds which may be voluntar	said grantor any bond required by law or regulation in connection with the entry or landise exported with or without benefit of drawback, or in connection with the n of any vessel or other means of conveyance owned or operated by said grantor, ly given and accepted under applicable Laws and regulations, consignee's and 85, Tariff Act of 1930, as amended or affidavits in connection with the entry of
	form any act that may be necessary or required by law or regulation in connection or operation of any vessel or other means of conveyance owned or operated by said
of protests under section 514 of the Tariff Ac properly be transacted or performed by an ag anything whatever requisite and necessary to ratifying and confirming all that the said ager attorney to remain in full force and effect unt is duly given to and received by a District Dis-	s in any district, any and all customs business, including making, signing, and filing of 1930, in which said grantor is or may be concerned or interested and which may not and attorney, giving to said agent and attorney full power and authority to do be done in the premises as fully as said grantor could do if present and acting, hereby a and attorney shall lawfully do by virtue of these presents: the foregoing power of the day of, or until notice of revocation in writing ector of Customs. If the donor of this power of attorney is a partnership, the said that after the expiration of 2 years from the date of its execution.
IN WITNESS WHEREOF, the said (X)	ıll name of shipper)
1)	in name of supper)
has caused these presents to be signed (X)	(Signature of Shipper)
	(Signature of Shipper)
WITNESSED BY (X)	Witness Signature
(Witness name)	Witness Signature

#### FORM APPROVED OMB NO. 1651-0014

# U.S. DEPARTMENT OF HOMELAND SECURITY Bureau of Customs and Border Protection

# DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6. 148.52. 148.53. 148.77

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the laws and regulations administered by the CBP. These regulations and forms apply to importers to ensure that they are complying with the law and to allow us to figure, collect, or refund the right amount of duty and tax. It is mandatory. The estimated average burden associated with this collection of information is 10 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0014), Washington, DC 20503.

		Reduction Project (1651-00	14), washington, DC 200	JU3.		
PART I TO BE COMPLETED BY ALL PERSONS SEEKING FRE assistance. REMEMBERAll of your statements are subject to						
IMPORTER'S NAME (Last, first and middle)	2. IMPORTER'S DATE OF BIRTH  3. IMPORTER'S DATE OF ARRIVAL			'AL		
4. IMPORTER'S U.S. ADDRESS		5. IMPORTER'S PORT	OF ARRIVAL			
		6. NAME OF ARRIVING	VESSEL CARRIER	AND ELICHT/TR	PAIN	
		O. NAME OF ARRIVING	VESSEL CARRIER	AND FLIGHT/TK	MAIN	
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband,	, minor childrer	n, etc.)				
8.THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	AME OF VESS	SEL/CARRIER	C. FROM (Country)		D. B/L OR AWB OR	I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS F. MA	ARKS AND N	JMBERS				
PART II TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. I	PERSONNE	A. NAME OF COUNTR	v	D LENGTH O	E TIME	
9. RESIDENCY ('X" appropriate box)  I declare that my place of residence abroad is was		A. NAME OF COUNTR	ĭ	B. LENGTH O	Yr.	Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One)	,					-
(1) Returning resident of the U.S. (2) No.	onresident:	a. Emigrating to th	e U.S.	b. Visiting	g the U.S.	
10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES I the undersigned further declare that ("X" all applicable items and submit pack	king list):					
A. Applicable to RESIDENT AND NONRESIDENT		C. Applicable to NO	ONRESIDENT ON	LY		
(1) All household effects acquired abroad for which free entry is sought w	vere used	(1) All articles of ap	oparel, personal ador	nment, toiletries a	and similar persona	al effects
abroad for at least one year by me or my family in a household of white family was a resident member during such period of use, and are not for any other person or for sale. (9804.00.05, HTSUSA)		myself, or those departure to the	entry is sought were a e members of my fam e United States and the	nily who accompan that they are appro	nied me, at the time opriate and are into	e of ended for
(2) All instruments, Implements, or tools of trade, occupation or employm professional books for which free entry is sought were taken abroad by my account or I am an emigrant who owned and used them abroad. (9)	(2) Any vehicles, tr	se and not for any oth railers, bicycles or oth t of me and my family	er means of conv	eyance being imp	orted are	
9804.00.15, HTSUSA)  B. Applicable to RESIDENT ONLY			to my personal use of			
All personal effects for which free entry is sought were taken abroad by m account. (9804.00.45, HTSUSA)	ne or for my					
PART III TO BE COMPLETED BY U.S. PERSONNEL AND EVAC	CUFES ON	Υ				
I, the undersigned, the owner, importer, or agent of the importer of the personal	al and househo	ld effects for which free				
possession of the importer, or of a member of the importer's family residing wit termination of assignment to extended duty (as defined in section 148.74(d) of United States, or because of Government orders or instructions evacuating the person and that they do not include any alcoholic beverages or cigars. Free en United States.	the Customs Fe importer to the	Regulations) at a post or e United States; and tha	station outside the Ut they are not importe	nited States and t	the CBP Territory of any	of the other
1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.	2	. A COPY OF THE IMPO WERE ISSUED ON:	ORTER'S TRAVEL O	RDERS IS ATTA	CHED AND THE C	ORDERS
PART IV TO BE COMPLETED BY ALL PERSONS SEEKING FF requirements and must be specifically declared						
A. For U.S. Personnel, Evacuees, Residents and Non-Residents	В.	For Residents and N	Non-Residents ON	NLY		
(1) Articles for the account of other persons. (2) Articles for sale or commercial use.		(7) Foreign household abroad and used les			usehold effects ac	
(3) Firearms and/or (4) Alcoholic articles of all	C.	For Resident ONLY	•			
ammunition. (1) Altoristic dialects of different types or tobacco products.		(9) Personal effects acc	quired abroad.			
(5) Fruits, plants, seeds, meats, or birds. (6) Fish, wildlife, animal products thereof.		(10) Foreign made artic				nis trip or
		(11) Articles taken abro	and for which alteration	ins or renairs wer	e nerformed abroa	ıd

D. LIST OF ARTICLES					
(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESCI	RIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	THIS TRII	I MERCHANDISE TAKEN ABROAD P: State where in the U.S. the foreign lise was acquired or when and where it ously declared to CBP.
PART V CARRIER'S CER				CC 41 44	1: 5 4
consignee of such articles within			must be released, neres	by certifies that the pe	erson named in Part I, 1., is the owner or
In accordance with the provisions  1. NAME OF CARRIER	of section 484(h),	Tariff Act of 1930, authority is hereby gi	ven to release the article  2. SIGNATURE OF A		
			2. 6.6.0.1. 6.1.2 6.7	.o ( aa o.g	, <u>J</u> uio
PART VI CERTIFICATION	TO BE COMPL	ETED BY ALL PERSONS SEEKIN	NG FREE ENTRY		
I, the undersigned, certify that this					
1. "X" One A. Authorized Agent* (From facts obtained from the importer) B. Importer					
2. SIGNATURE				3. DATE	
*An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.19, 14					nis declaration (see 19 CFR 141.19, 141.32, 141.33).
PART VII CBP USE ONLY (Inspected and Released)  1. SIGNATURE OF CBP OFFICIAL 2. DATE			2. DATE		

# TREASURY DEPARTMENT U.S. CUSTOMS SERVICE SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

Owner of Household Goods     (Last, first and middle)	
2. Date of Birth November 21 1984	3. Citizenship USA
4. Passport (Country and Number) USA, 567822269	
5. Social Security No. 535175676	6. Resident Alien No.
7. U.S. Address 1163 SE Goodnight Ave, Corvallis, Oregon	10. Employer Fluence Corporation
	11. Position with Company Commercial Manager
8. Foreign Address	
	12. Length of Employment 2 months
	13. Nature of Business Utilities
9. Reason for Moving Relocation	
	14. Name and Telephone of Company Official Who Can Verify Above Information
15. Name and Address of Freight Forwarders Packers and Shipping Agents	
16. Shipment Itinerary (specify place of loading and intermediate ports)	
()	
17. Certification I, the undersigned, certify that this declaration is correct and co	mplete
☐ A. Authorized Agent (from facts obtained from the importer)	
☐ B. Importer	
Signature	Date