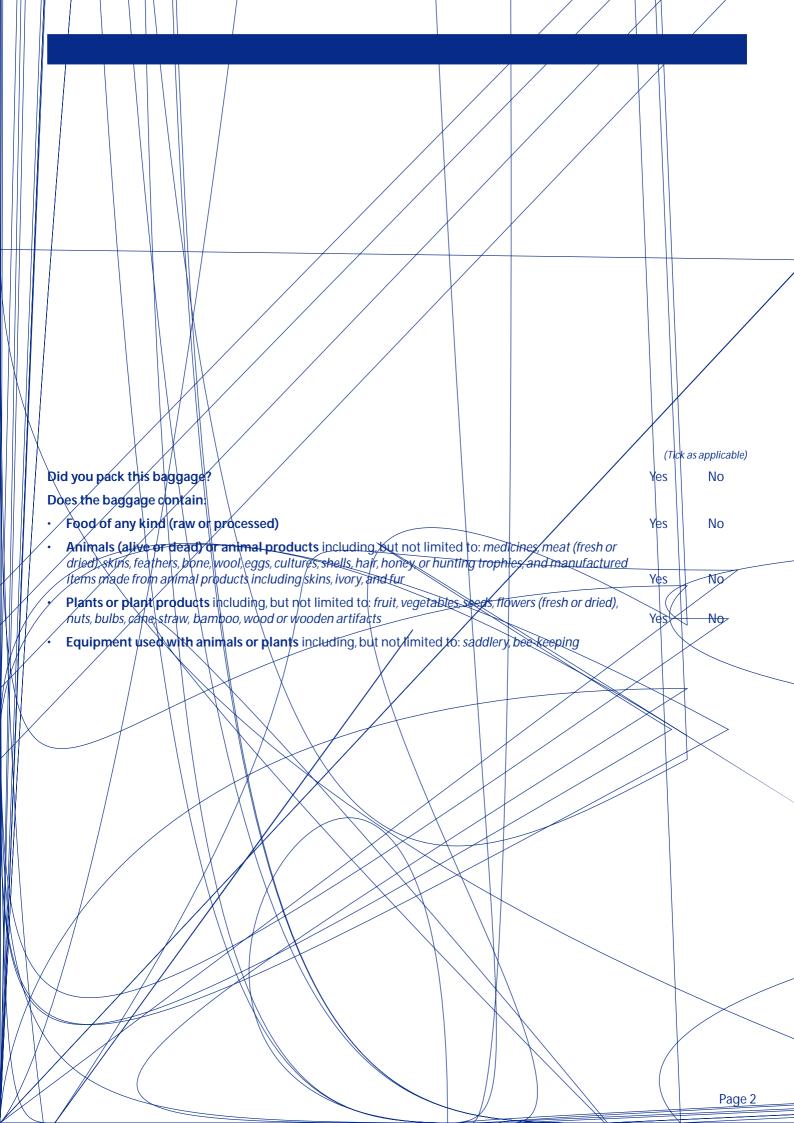




Notice



Other Persons Covered by this Declaration

Th	his section should specify all oth	ner persons, over 17 years of	age, who owi	n goods contained in the consignm	ent.			
Family Name:			Given or First Names:					
L				D. C. CRIV		10: :		
N	ationality:	Passport Number:		Date of Birth:	*Arriva	al Status:		
L Fa	amily Name:		Given or First Names:					
N	ationality:	Passport Number:		Date of Birth:	*Arriva	al Status:		
Fa	amily Name:		Given or	First Names:				
N	ationality:	Passport Number:		Date of Birth:	*Arriva	al Status:		
*	refer Note—Arrival Status on pag	ge 1						
	Does this	s Consignment Con	tain Any	of the Following Items?				
P	Prohibited and Restric	ted Goods						
•	Articles manufactured from rhinoceroses, hippopotamuses, feathers, coral, or shells				Yes (No 🔵		
•	Controlled Drugs of any kind	•	o: LSD, heroin,	cocaine, cannabis, ecstasy,	Yes	No (
	steroids, or performance enhancing drugs Prescribed Medicines of any kind				Yes (No (
•	Objectionable/Indecent arti	to: child pornography, material						
	misuse of a drug. These articles	depicting bestiality, or material which may promote, incite, or instruct in matters of crime or violence, or misuse of a drug. These articles can be in such forms as printed publications, video tapes, films, records, CD-ROMS, or other recorded media						
•	Weapons of any kind includir knives, daggers, knuckle duster	Yes	No (
lf	you answered YES to any of t		ms below.		163	140		
S	pecific Goods							
•	Cigarettes, cigars, tobacco, or	•			Yes	No 🔘		
•	• •	mmercial purposes (including goods for sale, lease, hire, exchange, or use in your own busines				No 🔾		
•		ds, or gifts intended for other persons. <i>Also refer** under Note—Arrival Status on page 1</i>				No ()		
	3 3 3 .	belonging to any person not listed on this declaration vehicle(s), motorcycle(s), caravan(s), trailer(s), watercraft, or aircraft				No (
•	Cash in any currency to the va				Yes \(\)	No O		

IMPORTANT: To avoid transfer of information to carbonated section, please ensure this page is opened out before completing.

If you have answered YES to any of the items listed under the Specific Goods section on page 3, or are in doubt whether any particular effects should be declared, please give details of these items below or attach a separate schedule.

Description of Goods			Price	Paid (in \$NZ)	Date of Purchase
Importe	er's Arrival o	r Intended A	rrival in Nev	v Zealand	
The importer arrived / intends to arri	ve in New Zealand	on (date or estimate	ate) at	(name of por	t or airport)
on board		from	atoj	(name or port	
(name of ship	or flight number)			(country of depart	ıre)
	Details of Ho	ousehold or (Other Effect	S	
The		which m	nake up this consi	gnment contain	bona fide
(number and type unaccompanied personal and/or hou			•		
		(please de			dollar value)
Are you fully aware of the contents of	•	nment?			Yes No
Do you have an inventory of the con Has any person listed on this declara		onal or household	effects into New	Zealand before?	Yes No Yes No
	Declaration I	by Importer	of the Good	ls	
	Decidiation				
1		(full name)			
being the importer of the goods, he the information provided is true, cor entry to obtain clearance of the good	rect and complete	. I also understand			
Date:	Signature:				
Declara	tion by Othe	r than the In	nporter of t	ne Goods	
'		(full name)			
of	loo	ntact address and phon	a number)		
hereby declare that I am clearing the in this form, and that the informatio information will be used to prepare	ese goods on beha n provided is to the	e best of my knowl	at I have read and ledge true, correc	t and complete. I	also understand the
Date:	Signature:				