(Please submit one copy only)

APPLICATION FOR PURCHASE OF
IMPORT NOTIFICATION (TEXTILES) FORMS (TRA 552)

Part A

To : The Director-General of Trade and Industry

Textiles Trader Registration (TTR) No. :_____

TTR Validity Period : From _____ to _____
(DD/MM/YY) (DD/MM/YY)

I, the undersigned, signing for and on behalf of ……

……
(Name and Address of Company/Registered Business)

with the above TTR No. and validity period, hereby apply to the Director-General of Trade and Industry for the purchase of ……. pad(s) of Import Notification (Textiles) forms (TRA 552).

I undertake that the import notification forms sold to me will only be used by my company/registered business during the validity period of its registration under the Textiles Trader Registration Scheme (TTRS). I shall take all necessary measures and make all necessary arrangements to ensure that the import notification forms are kept in safe custody and will not be transferred for use by other parties.

Signature ……

Name in Full and
in BLOCK LETTERS ……

Date ……

……
(Business Chop)

The signatory must be an authorised signatory by the above company/registered business.

Note : This approved application form must be submitted to the Collection and Form Sales Office for the purchase of import notification forms within the TTR validity period of the company/registered business and within three working days following the date of approval as shown in Part B(I) below.

Part B

FOR OFFICIAL USE ONLY

(I) To : Collection and Form Sales Office (Rm. 104, 1/F)

The above application is approved. Please issue the pad(s) as required.

Chop ……

Initial/Designation ……

Date of approval ……

(II) To : TTRS Unit (Notification Checking)

……. pad(s) containing the following serial numbers has/have been issued.

From To

Initial ……

Collection and Form Sales Office

Date ……

Part C (To be completed upon collection of import notification forms)

ACKNOWLEDGEMENT OF RECEIPT OF
IMPORT NOTIFICATION (TEXTILES) FORMS (TRA 552)

I, the undersigned, hereby confirm that import notification forms with the above-mentioned serial numbers have been received by me on behalf of the above company/registered business.

Signature ……

Name in Full and
in BLOCK LETTERS ……

Date ……