

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

correct form

FORM APPROVED OMB NO. 1651-0014

**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.

PART I -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Please consult with the CBP official for additional information or assistance. REMEMBER--All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle)		2. IMPORTER'S DATE OF BIRTH	3. IMPORTER'S DATE OF ARRIVAL
4. IMPORTER'S U.S. ADDRESS		5. IMPORTER'S PORT OF ARRIVAL	
6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.)			

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VESSEL/CARRIER	C. FROM (Country)	D. B/L OR AWB OR I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS		F. MARKS AND NUMBERS		

PART II -- TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES

9. RESIDENCY ("X" appropriate box) I declare that my place of residence abroad <input type="checkbox"/> is <input type="checkbox"/> was	A. NAME OF COUNTRY	B. LENGTH OF TIME Yr. Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input type="checkbox"/> (1) Returning resident of the U.S. <input type="checkbox"/> (2) Nonresident:	<input type="checkbox"/> a. Emigrating to the U.S.	<input type="checkbox"/> b. Visiting 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 packing list):

- | | |
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| <p>A. Applicable to RESIDENT AND NONRESIDENT</p> <p><input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA)</p> <p><input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA)</p> <p>B. Applicable to RESIDENT ONLY</p> <p><input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)</p> | <p>C. Applicable to NONRESIDENT ONLY</p> <p><input type="checkbox"/> (1) All articles of apparel, personal adornment, toiletries and similar personal effects for which free entry is sought were actually owned by me and in the possession of myself, or those members of my family who accompanied me, at the time of departure to the United States and that they are appropriate and are intended for our personal use and not for any other person nor for sale. (9804.00.20 HTSUSA)</p> <p><input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)</p> |
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PART III -- TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States; and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON:
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PART IV -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item D on the reverse.)

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| <p>A. For U.S. Personnel, Evacuees, Residents and Non-Residents</p> <p><input type="checkbox"/> (1) Articles for the account of other persons.</p> <p><input type="checkbox"/> (2) Articles for sale or commercial use.</p> <p><input type="checkbox"/> (3) Firearms and/or ammunition.</p> <p><input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.</p> <p><input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.</p> <p><input type="checkbox"/> (6) Fish, wildlife, animal products thereof.</p> | <p>B. For Residents and Non-Residents ONLY</p> <p><input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year.</p> <p><input type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.</p> <p>C. For Resident ONLY</p> <p><input type="checkbox"/> (9) Personal effects acquired abroad.</p> <p><input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP.</p> <p><input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.</p> |
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D. LIST OF ARTICLES

(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP: State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to U.S. Customs.

PART V—CARRIER'S CERTIFICATE AND RELEASE ORDER

The undersigned carrier, to whom or upon whose order the articles described in PART I, 8., must be released, hereby certifies that the person named in Part I, 1., is the owner or consignee of such articles within the purview of section 484(h), Tariff Act of 1930.

In accordance with the provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.

1. NAME OF CARRIER	2. SIGNATURE OF AGENT (Print and sign) Date
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PART VI—CERTIFICATION TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY

I, the undersigned, certify that this declaration is correct and complete.

1. "X" One	
<input type="checkbox"/> A. Authorized Agent* (From facts obtained from the importer)	<input type="checkbox"/> 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, 141.32, 141.33)

PART VII—CUSTOMS USE ONLY (Inspected and Released)	1. SIGNATURE OF CUSTOMS OFFICIAL	2. DATE
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Field 1 - IMPORTER'S NAME: Name of the person that the goods belong to.

Field 2 - IMPORTER'S DATE OF BIRTH: Date of birth of the person named in Field 1.

Field 3 - IMPORTER'S DATE OF ARRIVAL: Date, which the importer arrived in the United States.

Field 4 - IMPORTER'S ADDRESS: The address at which the importer will be residing in the United States.

Field 5 - IMPORTER'S PORT OF ARRIVAL: The border point used by the importer to enter the United States.

Field 6 - NAME OF ARRIVING VESSEL: State the mode of transportation the importer used to enter the United States (i.e. airplane, car, train, or bus).

Field 7 - NAME OF ACCOMPANYING HOUSEHOLD MEMBERS: If the shipment contains the belongings of other household members entering the United States with the importer, list their names here.

Field 8 A - F

(A) - DATE: Date in which the goods were picked up by the carrier / courier

(B) - NAME OF VESSEL: Enter the name of the carrier / courier

(C) - FROM (COUNTRY): Country in which the goods are picked up.

(D) - B/L, OR AWB OR I.T. NO: Can be left blank

(E) - NUMBER AND KINDS OF CONTAINERS: Enter the numbers of kinds of packages in the shipment (example: 5 Boxes).

(F) - MARKS AND NUMBERS: Identifying factors (i.e. 1A: #2, 1 out of 5, etc.)

Part II

Field 9 - RESIDENCY: Indicate the importer's residency status. Note: A Canadian citizen going to the U.S. would enter "X" in the "IS" Field. A U.S. citizen entering / returning the United States would enter "X" in the "WAS" Field.

(A) NAME OF COUNTRY: Indicate the name of the Country that applies to the "Residency Abroad" Note: Always indicate Canada if going from Canada to the United States.

(B) LENGTH AND TIME: Indicate the length of time in which the importer resided in the country listed in the Field 9 (A).

(C) RESIDENCY STATUS UPON MY / OUR ARRIVAL: Enter "X" in the Field that applies to the importer's residency status upon entering the United States. Note: Ensure that the Field that is chosen coincides with the information provided for Field 8 (A).

Field 10 - STATEMENT (S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES: Mark off any Field(s) that matches the description of the goods in the shipment.

PART III

Complete this section only if it applies to the importer.

PART IV (A) (B) (C)

Enter an "X" in the Field(s) that apply to the importer.

PART IV (D)

- LIST OF ARTICLES: Enter the item number (s) checked off from Part 4 (A) (B) (C)
- Description of Merchandise: Provide complete description of the goods in the shipment.
- VALUE OR COST OF REPAIRS: Value for each good in the shipment.

•FOREIGN MERCHANDISE TAKEN ABROAD: Can be left blank.

PART V

To be completed by the Carrier / Courier.

PART VI

Field 1 - Enter an "X" in the Field that applies to the person completing the 3299.

Field 2 - Provide signature.

Field 3 - Enter the Date.

PART VII

For Custom's use only.