



CICS 077

CLIENT CODE APPLICATION

PLEASE REFER TO NOTES ON PAGE TWO OF THIS FORM

Please tick all the following which apply:

Company <input type="checkbox"/>	Sole Trader <input type="checkbox"/>	Partnership <input type="checkbox"/>	Individual <input type="checkbox"/>
CCA <input type="checkbox"/>	Excise Client <input type="checkbox"/>	Broker <input type="checkbox"/>	

Will you be:	Importing <input type="checkbox"/> or	Exporting <input type="checkbox"/> or	Both <input type="checkbox"/>
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Full Company/Partnership/Sole trader/Individual Name (Refer to Note 2)

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Company registration Number:

RMD No:

Full Address:

Full Postal Address:

Island:

Village:

Post code:

Landline Phone Number:

Fax Number:

Mobile Number:

Email Address:

Web Address:

Full particulars of all Directors/Shareholders/Partners/Sole Trader/Individual – continuation page on page 2

1.
Surname	Given Names	Date of birth	Identification type	Number
2.
Surname	Given Names	Date of birth	Identification type	Number

Contact Person (NB: Copy of ID of Contact Person/Signatory is required)

Full Name: Date Of Birth:

Position: Ph: Email:

Please adviseof the client code allocated to me (Refer to note 4 on reverse)

Ph: Fax:

DECLARATION

I Declare the information provided is true and correct in. Refer to note 6)

Signature:

Date:

Official use only

Processing Officer:

New/Existing Code:

Date:

Full particulars of all Directors/Shareholders/Partners/Sole Trader/Individual – continuation from page 1

3.
Surname	Given Names	Date of birth	Identification type	Number
4.
Surname	Given Names	Date of birth	Identification type	Number
5.
Surname	Given Names	Date of birth	Identification type	Number
6.
Surname	Given Names	Date of birth	Identification type	Number

IMPORTANT INFORMATION

The information of the Client Code application form (and any subsequent customs entries) may be supplied to the Cook Islands Statistics Office for use in official stats.

NOTES:

1. You must tick ALL boxes that apply
2. A copy of your company's Certificate of Incorporation must be attached, also details of trading name if different from registered company name for Partnerships & Sole Traders, and trading name (if applicable) is required. Private Individuals must supply photo ID, passport or drivers license.
3. A copy of the passport biography details page is the preferred ID for all names listed including directors/partners/contact persons and signatory of form, however, if no passport exists please provide a copy of that person's driver's license. All directors/partners must be listed.
4. Complete this section if an agent/broker is acting on your behalf.
5. This application must be completed and signed by an authorized person of the entity concerned or the importer/exporter of the goods if the importer/exporter is a private individual.
6. **Incomplete applications will be rejected and returned for completion**
7. Please note that you are required to keep business records in the Cook Islands pursuant to section 129 of the Customs Revenue and Border Protection Act 2012.

FAX OR EMAIL COMPLETED APPLICATIONS TO THE COOK ISLANDS CUSTOMS SERVICE OFFICE ON THE FOLLOWING CONTACTS:

Fax: +682 29465

Email: customs.applications@cookislands.gov.ck