



COMMONWEALTH OF DOMINICA  
 MINISTRY OF FINANCE  
**Customs & Excise Division**

Tel. No: 767 266 3730/266 3717  
 Email: [customs@cwdom.dm](mailto:customs@cwdom.dm)  
 Website: [www.dominica.gov.dm](http://www.dominica.gov.dm)

Customs House  
 Roseau  
 Dominica

**REQUEST FOR REFUND**

To **Comptroller of Customs**, I hereby request for a refund of Duties and Taxes and to this effect I submit the following details:

**1. Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Address: \_\_\_\_\_ Tel: \_\_\_\_\_

**2. Declaration Information**

Declarant Name:			No:
Consignee Name:			No:
Importer Name:			No:
Customs Office	DM	Registration #	C
Assessment Date	/ /20	Assessment #	L
Receipt Date	/ /20	Receipt#	R

**3. Reason for Refund**

Tick the appropriate box and give an explanation for refund request below:

- |                                                   |                                            |                                        |
|---------------------------------------------------|--------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Incorrect Classification | <input type="checkbox"/> Incorrect CPC     | <input type="checkbox"/> Documentation |
| <input type="checkbox"/> Incorrect Invoice Value  | <input type="checkbox"/> Incorrect Freight | <input type="checkbox"/> Other         |

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I hereby request a REFUND in the amount of XCD\$ \_\_\_\_\_

**4. Bank Information**

Payee Name	Name of Bank
Payee Address	Bank A/C #
Contact #	Contact #

**N.B Upon acceptance, refunds will be made payable to the Consignee of the Goods. VAT will be refunded by the VAT Unit**

5. Summary of Total Duties and Taxes to be refunded				
Line#	Commodity	Min/Prog/Sub	Code / Code Name	Amount
		D31 F700 F71	11002 / IMA	\$
		D31 F700 F71	11001 / IMO	\$
		D31 F700 F71	11012 / ENS	\$
		D31 F700 F71	11004/ CSC	\$
		D31 F800 F82	12011 / EXT	\$
		D31 F800 F82	83023 / VAT	\$
		D31 F700 F71	11002 / IMA	\$
		D31 F700 F71	11001 / IMO	\$
		D31 F700 F71	11012 / ENS	\$
		D31 F700 F71	11004/ CSC	\$
		D31 F800 F82	12011 / EXT	\$
		D31 F800 F82	83023 / VAT	\$
		D31 F700 F71	11002 / IMA	\$
		D31 F700 F71	11001 / IMO	\$
		D31 F700 F71	11012 / ENS	\$
		D31 F700 F71	11004/ CSC	\$
		D31 F800 F82	12011 / EXT	\$
		D31 F800 F82	83023 / VAT	\$
			<b>Grand Total Duties &amp; taxes [Customs]</b>	\$
			<b>Grand Total [VAT]</b>	\$

Use Page 2 as a continuation page for additional items

6. Disclaimer and Signature

All sections of this application form must be completed in order to receive a refund from the Treasury Department. I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may result in the denial of any applicable refund of duties and taxes.

..... Applicant's Name      Applicant's Signature      /...../...../20.....

OFFICE USE ONLY

<input type="checkbox"/> <b>ACCEPTED</b>  <input type="checkbox"/> <b>DENIED</b>	<b>COMMENTS</b>	<hr/> <i>Post Clearance Services</i> <hr/> <i>Certified Correct by Assistant Comptroller</i>
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