

# Department of Customs

## Excise Registered Consignee Application

### Declaration

I declare that all information given is to my knowledge true, complete and correct. I also bind myself to inform immediately any change in circumstance to the Commissioner for Revenue.

Applicant's Signature: \_\_\_\_\_

Name & Surname (in Block Letters): \_\_\_\_\_

ID Card Number: \_\_\_\_\_

Date: \_\_\_\_\_

### For Office Use:

File No:

Date of Receipt of Application: