



TANZANIA BUREAU OF STANDARDS

The Standards Act No. 2 of 2009

DESTINATION INSPECTION REQUEST FORM

1. Name of importer:
2. Email of the importer: Mobile no:
3. Address of the importer:
4. Name of clearing agent:
5. Email of clearing agent: Mobile no:
6. Address of clearing agent:
7. Description of Product (s):
8. Country of origin:
9. Quantity (metric tons/pkg/ctn):
10. Invoice number (s)
11. Invoice Value:
12. Bill of Lading/Airway Bill/RCN:
13. Chassis Number:
14. Container No. (s):
15. Category of the consignment:
 - Personal effect
 - Exempted goods (from PVoC/Capital goods/Government Projects/Donated goods/Diplomatic goods)
 - TBS Certified Products (product certification scheme)
 - Other category

Remarks:

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Requested by:

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Name of Importer/CFA

Signature & Stamp

Date

DECLARATION:

I declare that the details furnished above are true and correct, in case any of the above information is found to be false or untrue I am aware that legal action will be taken against me.

NOTE: THIS FORM SHALL STRICTLY BE USED TO REQUEST FOR DESTINATION INSPECTION. CLEARANCE PERMIT WILL BE ISSUED AFTER TBS HAS INSPECTED THE CONSIGNMENT.