

IMPORT INSPECTION REQUEST FORM



MWAMI

Nkhazi House, Corner of
Chachacha Road and Nkhazi Road
P.O Box 31302 Lusaka,
Tel: +260 211 224 900
Branches: Chirundu, Livingstone, Nakonde, Kazungula,
Chanida, Mwami, Katima Mmulilo, Ndola, Solwezi, Mansa,
Kasama, Chinsali, Mongu, Choma, Chipata

MW No. 17- 01- 00 -

0199

(Please complete parts 1 to 9 of this form and forward it to the Zambia Compulsory Standards Agency. Please note that lack of information may result in delays).

1. Consignee (names & address) <div style="border: 1px solid black; height: 50px;"></div>	2. Consignor/ Supplier (names & address) <div style="border: 1px solid black; height: 50px;"></div>																																																									
3. Importer's Forwarding Agent (names & address) <div style="border: 1px solid black; height: 50px;"></div>	4. Invoice Value (K) <div style="border: 1px solid black; height: 20px;"></div>																																																									
	5. No & Kind of Package <div style="border: 1px solid black; height: 20px;"></div>																																																									
	6. Quantity <div style="border: 1px solid black; height: 20px;"></div>																																																									
7. Name or Description of Product <div style="border: 1px solid black; height: 20px;"></div>																																																										
8. Product Brand Name <div style="border: 1px solid black; height: 20px;"></div>																																																										
9. To The Director, Zambia Compulsory Standards Agency <p>Please kindly inspect an import consignment as described above and issue an import Certificate of Conformance/ Annual import quantity certificate</p> <p>The consignment can be inspected at</p> <p>which is km from Lusaka</p> <p>I undertake to settle all fees chargeable and abide by the Regulations governing the import Quality Monitor Scheme - IQMS</p> <p>.....</p> <p>Name of Importer / Agent's Representative</p> <p>.....</p> <p>Signature:</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">10. FOR OFFICIAL USE ONLY</td> <td style="text-align: right;">Entry Reg No.</td> </tr> <tr> <td colspan="3">Regulation</td> </tr> <tr> <td colspan="3">Applicable Zambia Standard</td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td style="text-align: center;">Item</td> <td style="text-align: center;">Rate</td> <td style="text-align: center;">Amount (K)</td> </tr> <tr> <td>Registration</td> <td></td> <td></td> </tr> <tr> <td>Inspection & Sampling</td> <td></td> <td></td> </tr> <tr> <td>Testing</td> <td></td> <td></td> </tr> <tr> <td>Transporting</td> <td></td> <td></td> </tr> <tr> <td>Reporting / Penalty</td> <td></td> <td></td> </tr> <tr> <td>Certification</td> <td></td> <td></td> </tr> <tr> <td>Sub - Total</td> <td></td> <td></td> </tr> <tr> <td>Value Added Tax (VAT)</td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">TOTAL</td> <td></td> </tr> <tr> <td>Invoice No.</td> <td>Receipt No.</td> <td>SRF No.</td> </tr> <tr> <td colspan="3">Prepared by:</td> </tr> <tr> <td colspan="3">Date:/...../..... Sign:</td> </tr> <tr> <td colspan="3">Prepared by:</td> </tr> <tr> <td colspan="3">Date:/...../..... Sign:</td> </tr> </table>	10. FOR OFFICIAL USE ONLY		Entry Reg No.	Regulation			Applicable Zambia Standard						Item	Rate	Amount (K)	Registration			Inspection & Sampling			Testing			Transporting			Reporting / Penalty			Certification			Sub - Total			Value Added Tax (VAT)			TOTAL			Invoice No.	Receipt No.	SRF No.	Prepared by:			Date:/...../..... Sign:			Prepared by:			Date:/...../..... Sign:		
10. FOR OFFICIAL USE ONLY		Entry Reg No.																																																								
Regulation																																																										
Applicable Zambia Standard																																																										
Item	Rate	Amount (K)																																																								
Registration																																																										
Inspection & Sampling																																																										
Testing																																																										
Transporting																																																										
Reporting / Penalty																																																										
Certification																																																										
Sub - Total																																																										
Value Added Tax (VAT)																																																										
TOTAL																																																										
Invoice No.	Receipt No.	SRF No.																																																								
Prepared by:																																																										
Date:/...../..... Sign:																																																										
Prepared by:																																																										
Date:/...../..... Sign:																																																										

Zambia Compulsory Standards Agency