

Department of the Treasury  
U.S. Customs Service  
New York Region  
New York, N.Y. 10048

SUPPLEMENTAL DECLARATION FOR INACCOMPANIED  
PERSONAL AND HOUSEHOLD EFFECTS

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1. Owner of Household Goods \_\_\_\_\_  
(Last Name, First & Middle)
2. Date of Birth \_\_\_\_\_
3. Citizenship \_\_\_\_\_
4. Passport Information \_\_\_\_\_  
(Country & Number)
5. Social Security Number \_\_\_\_\_
6. Resident Alien Number \_\_\_\_\_
7. U.S Address \_\_\_\_\_
8. Foreign Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Reason For Moving \_\_\_\_\_  
\_\_\_\_\_
10. Employer \_\_\_\_\_  
\_\_\_\_\_
11. Position with the Company \_\_\_\_\_
12. Length of Employment \_\_\_\_\_
13. Nature of the Business \_\_\_\_\_  
\_\_\_\_\_
14. Name and telephone number of a company official who can verify the above information  
\_\_\_\_\_  
\_\_\_\_\_
15. Name and address of freight forwarders, packers and shipping agents  
\_\_\_\_\_  
\_\_\_\_\_
16. Shipment itinerary (specific place of loading and intermediate ports)  
\_\_\_\_\_  
\_\_\_\_\_
17. Certification (circle one)      A. Authorized Agent      B. Importer
18. Signature \_\_\_\_\_