

Application for import / re-export & export / re-import of empty packaging by Oral Declaration



(Delegated Regulation (EU)2015/2446 Article 135, 136,163 and 165)

Name of Importer:	
Address (include Eircode):	
Telephone Contact Details:	
EORI Number:	

Type of Packaging (Please select)	Tick as appropriate
Crate	
Box	
Cylinder	
Cage	
Other – (Please specify)	

(Please attached example of packaging by means of picture / photo)

Purpose of packaging:

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Details of any permanent markings or serial numbers:

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Value per item:	
Tariff Code:	
Estimated Volume per week (No. of units):	
Estimated No. of shipments per week:	
Name of Transport / Haulage Company:	

Signature: _____ **Date:** _____

Position in Company: _____

Please email the fully completed application form to customsreliefs@revenue.ie

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