



COMMONWEALTH OF DOMINICA

MINISTRY OF FINANCE
Customs & Excise Division

Tel. No: 767 448 2401 Ext 3717/266 3717
Telefax: 767 448 7950
Email: customs@cwdom.dm
Website: www.customs.gov.dm

Customs House
Roseau
Dominica
West Indies

REQUEST FOR REFUND

Date: ----/----/-----
D M YR

Comptroller of Customs
Woodbridge Bay
Fond Cole
Dominica

Declarant: ----- No: -----

Consignee: ----- No: -----

Importer: ----- No: -----

I hereby request a refund in the amount of \$-----

Declaration Reference Registration C #----- of----/----/----- L#----- of----/----/-----

Payment Receipt #----- Date paid ----/----/-----

Reasons for refund: Tick the appropriate box and state your reason

- | | | |
|---|--|--|
| <input type="checkbox"/> Incorrect Classification | <input type="checkbox"/> Incorrect Value | <input type="checkbox"/> Incorrect CPC |
| <input type="checkbox"/> Incorrect Freight | <input type="checkbox"/> Documentation | <input type="checkbox"/> Other |

Name of Payee: _____

Address of Payee: _____

Mobile Contact Number: _____

Bank Account Number: _____

Name of Bank: _____

Summary of total duties to be refunded:

Line #	Commodity	Min/Prog/Sub	Code/Code name	Amount
		D31 F700 F71	11002 / I.D. Alco	\$
		D31 F700 F71	11001 / I.D. Other	\$
		D31 F700 F71	11012 / E.S.C	\$
		D31 F700 F71	11004 / C.S.C	\$
		D31 F800 F82	12011 / Excise Tax	\$
		D31 F800 F82	83023 / V.A.T	\$
Line #	Commodity	Min/Prog/Sub	Code/Code name	Amount
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		D31 F700 F71	11001 / I.D. Other	\$
		D31 F700 F71	11012 / E.S.C	\$
		D31 F700 F71	11004 / C.S.C	\$
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		D31 F700 F71	11004 / C.S.C	\$
		D31 F800 F82	12011 / Excise Tax	\$
		D31 F800 F82	83023 / V.A.T	\$
			Grand Total Duties & Taxes [Customs]	\$
			Grand Total [VAT]	\$

Importer/Broker

Accepted

Denied

Post Clearance Services

Assistant Comptroller
Certified Correct

***N.B: Upon acceptance refunds will be made payable to the Importer of the goods
VAT to be refunded by the VAT Unit***

“Professionalism and Productivity . . . Requisites for the Journey to Excellence”