



## OZONE DEPLETING SUBSTANCES REGULATIONS 2010

### FORM 11

#### DEPARTMENT OF ENVIRONMENT

#### EXPORT DECLARATION

(Sections 16 and 17 of the Act and Regulation 23)

**TO: Fiji Islands Revenue & Customs Service at \_\_\_\_\_port/airport**  
**AND To:**

Ozone Depleting Substances Unit,  
GPO Box 2109, Suva, Fiji  
Phone (679) 3311069  
Fax (679) 3318089

This is to declare that a quantity of controlled substances is due to leave from the above port/airport at \_\_\_\_\_ (time) on \_\_\_\_\_ (date) destined for \_\_\_\_\_

Flight no. or ship's name: \_\_\_\_\_

Nature of the  container/ equipment/ other  
(tick as applicable)

#### **Controlled Substance**

<u>Name</u>	<u>Quantity</u>	<u>Place of origin</u>	<u>Recipient</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Master**/ **Captain**/ **Customs agent**  
(tick as applicable)

#### **Contact details**

Full name \_\_\_\_\_

Name of employer \_\_\_\_\_

Name and address of place of business \_\_\_\_\_

Residential address \_\_\_\_\_

Telephone Home \_\_\_\_\_ Work \_\_\_\_\_  
Mobile \_\_\_\_\_ Fax \_\_\_\_\_

E-mail address \_\_\_\_\_

**Identity of the authorised supplier who is exporting the consignment (if not the Declarant)**

\_\_\_\_\_

**Declaration**

I declare the above particulars to be accurate to the best of my knowledge and belief

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

\_\_\_\_\_