

1

Copy for the country of dispatch/export

2 Consignor/Exporter No <div></div>		1 DECLARATION	
		3 Forms	4 Loading lists
		5 Items	6 Total packages
		7 Reference number	
8 Consignee No		9 Person responsible for financial settlement No	
		10 Country first destin.	11 Trading country
		13 CAP	
14 Declarant/Representative No		15 Country of despatch/export	
		15 C disp./exp. Code a ₁ b ₁	
		17 Country destin. Code a ₁ b ₁	
		16 Country of origin	
		17 Country of destination	
18 Identity and nationality of means of transport at departure		19 Ctr.	20 Delivery terms
21 Identity and nationality of active means of transport crossing the border		22 Currency and total amount invoiced	
		23 Exchange rate	
		24 Nature of transaction	
25 Mode of transport at the border		26 Inland mode of transport	27 Place of loading
		28 Financial and banking data	
29 Office of exit		30 Location of goods	

31 Packages and description of goods	Marks and numbers — Container No(s) — Number and kind	32 Item No	33 Commodity Code		
			34 Country origin Code		
		35 Gross mass (kg)			
		37 PROCEDURE		38 Net mass (kg)	
		39 Quota			
		40 Summary declaration/Previous document			
		41 Supplementary units			
		A.I. Code			
		46 Statistical value			

44 Additional information/ Documents produced/ Certificates and authorisations	47 Calculation of taxes					48 Deferred payment		49 Identification of warehouse	
	Type	Tax base	Rate	Amount	MP				
	Total:								
						B ACCOUNTING DETAILS			

50 Principal No		Signature:		C OFFICE OF DEPARTURE	
51 Intended offices of transit (and country)	represented by				
	Place and date:				

52 Guarantee not valid for	Code	53 Office of destination (and country)
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D CONTROL BY OFFICE OF DEPARTURE	Stamp:	54 Place and date:
Result:		
Seals affixed: Number:		
Identity:		
Time limit (date):		
Signature:		Signature and name of declarant/representative:

EUROPEAN COMMUNITY

1 2 3 4 5 6 7

2	2 Consignor/Exporter		No		3 Forms		4 Loading lists		5 Items		6 Total packages		7 Reference number	
	8 Consignee		No		9 Person responsible for financial settlement No									
	14 Declarant/Representative		No		10 Country first destin.		11 Trading country		13 CAP		15 C disp. /exp. Code		17 Country destin. Code	
	18 Identity and nationality of means of transport at departure		19 Ctr.		20 Delivery terms		16 Country of origin		17 Country of destination		22 Currency and total amount invoiced		23 Exchange rate	
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	28 Financial and banking data		29 Office of exit		30 Location of goods		32 Item No		33 Commodity Code		34 Country origin Code		35 Gross mass (kg)	
	37 PROCEDURE		38 Net mass (kg)		39 Quota		40 Summary declaration/Previous document		41 Supplementary units		A.I. Code		46 Statistical value	
	44 Additional information/ Documents produced/ Certificates and authorisations		47 Calculation of taxes		Type		Tax base		Rate		Amount		MP	
	50 Principal		No		Signature:		C OFFICE OF DEPARTURE		51 Intended offices of transit (and country)		52 Guarantee		53 Office of destination (and country)	
	54 Place and date:		Stamp:		Signature and name of declarant/representative:		55 Office of destination (and country)		56 Place and date:		Stamp:		Signature and name of declarant/representative:	

EUROPEAN COMMUNITY 1 2 3 4 5 6 7

3	2 Consignor/Exporter No					1 DECLARATION							
	8 Consignee No					3 Forms		4 Loading lists					
						5 Items		6 Total packages		7 Reference number			
						9 Person responsible for financial settlement No							
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	21 Identity and nationality of active means of transport crossing the border					16 Country of origin		17 Country of destination					
	25 Mode of transport at the border					26 Inland mode of transport		27 Place of loading		28 Financial and banking data			
	29 Office of exit					30 Location of goods							
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					40 Summary declaration/Previous document								
47 Calculation of taxes					41 Supplementary units								
							A.I. Code						
							46 Statistical value						
Type					Tax base		Rate		Amount		MP		
Total:													
50 Principal No					Signature:				C OFFICE OF DEPARTURE				
51 Intended offices of transit (and country)					represented by		Place and date:						
52 Guarantee not valid for					Code		53 Office of destination (and country)						
D CONTROL BY OFFICE OF DEPARTURE					Stamp:		54 Place and date:		Signature and name of declarant/representative:				
Result:													
Seals affixed: Number:													
Identity:													
Time limit (date):													
Signature:													

4

Copy for the office of destination

2 Consignor/Exporter
No

8 Consignee
No

14 Declarant/Representative
No

18 Identity and nationality of means of transport at departure

19 Ctr.

21 Identity and nationality of active means of transport crossing the border

25 Mode of transport at the border

27 Place of loading

4

1 DECLARATION

3 Forms

4 Loading lists

5 Items

6 Total packages

IMPORTANT NOTE

Where this copy is used exclusively for establishing the COMMUNITY STATUS OF GOODS NOT MOVING UNDER THE COMMUNITY TRANSIT PROCEDURE, only the information in boxes 1, 2, 3, 5, 14, 31, 32, 35, 54 and, where appropriate, 4, 33, 38, 40 and 44 is needed for that purpose.

15 Country of dispatch/export

17 Country of destination

31 Packages and description of goods

Marks and numbers — Container No(s) — Number and kind

32 Item No

33 Commodity Code

35 Gross mass (kg)

38 Net mass (kg)

40 Summary declaration/Previous document

44 Additional information/ Documents produced/ Certificates and authorisations

A.I. Code

55 Transshipments

Place and country:

Ident. and nat. new means transp.:

Ctr. (1) Identity of new container:

(1) Enter 1 if Yes or 0 if NO.

Place and country:

Ident. and nat. new means transp.:

Ctr. (1) Identity of new container:

(1) Enter 1 if Yes or 0 if NO.

F CERTIFICATION BY COMPETENT AUTHORITIES

New seals: Number: identity:

Signature: Stamp:

New seals: Number: identity:

Signature: Stamp:

50 Principal
No

Signature:

51 Intended offices of transit (and country)

represented by

Place and date:

52 Guarantee
not valid for

Code

53 Office of destination (and country)

54 Place and date:

Signature and name of declarant/representative:

D CONTROL BY OFFICE OF DEPARTURE

Result:

Seals affixed: Number:

Identity:

Time limit (date):

Signature:

Stamp:

5

2 Consignor/Exporter No

☐

3 Forms

4 Loading lists

5 Items

6 Total packages

Copy for return — Community transit

8 Consignee No

15 Country of dispatch/export

17 Country of destination

18 Identity and nationality of means of transport at departure

19 Ctr.

21 Identity and nationality of active means of transport crossing the border

25 Mode of transport
at the border

27 Place of loading

Tilbagesendes til:

Να επιστραφεί

Renvoyer à:

Terugzenden aan:

Zurücksenden an:

Return to:

Rinvia a:

Devolver a:

BT-CCTO
HM Revenue and Customs
BX9 1EH

5

31 Packages
and
description
of goods

Marks and numbers — Container No(s) — Number and kind

32 Item
No

33 Commodity Code

35 Gross mass (kg)

38 Net mass (kg)

40 Summary declaration/Previous document

44 Additional
information/
Documents
produced/
Certificates
and authori-
sations

A.I. Code

55 Tranship-
ments

Place and country:

Ident. and nat. new means transp.:

Ctr. ☐ (1) Identity of new container:

(1) Enter 1 if Yes or 0 if NO.

Place and country:

Ident. and nat. new means transp.:

Ctr. ☐ (1) Identity of new container:

(1) Enter 1 if Yes or 0 if NO.

F CERTIFI-
CATION BY
COMPE-
TENT AU-
THORITIES

New seals: Number: identity:

Signature:

Stamp:

New seals: Number: identity:

Signature:

Stamp:

50 Principal No

Signature:

C OFFICE OF DEPARTURE

51 Intended
offices
of transit
(and country)

represented by

Place and date:

52 Guarantee

not valid for

Code

53 Office of destination (and country)

D CONTROL BY OFFICE OF DEPARTURE

Stamp:

Result:

Seals affixed: Number:

Identity:

Time limit (date):

Signature:

6

Copy the country of destination

6

2 Consignor/Exporter No		1 DECLARATION	
<input type="checkbox"/>		3 Forms	4 Loading lists
		5 Items	6 Total packages
		7 Reference number	
8 Consignee No		9 Person responsible for financial settlement No	
		10 Country last consigned	11 Trad./Prod. country
		12 Value details	
		13 CAP	
14 Declarant/Representative No		15 Country of dispatch/export	
		15 C disp. /exp. Code	
		17 Country destin. Code	
		16 Country of origin	
		17 Country of destination	
18 Identity and nationality of means of transport on arrival		19 Ctr.	
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25 Mode of transport at the border		26 Inland mode of transport	
27 Place of unloading		28 Financial and banking data	
29 Office of entry		30 Location of goods	

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		34 Country origin Code	35 Gross mass (kg)	36 Preference
		37 PROCEDURE	38 Net mass (kg)	39 Quota
		40 Summary declaration/Previous document		
		41 Supplementary units	42 Item price	
		43 VM code		
		A.1. Code	45 Adjustment	
		46 Statistical value		

47 Calculation of taxes	Type	Tax base	Rate	Amount	MP	48 Deferred payment	49 Identification of warehouse
	Total:						
B ACCOUNTING DETAILS							

51 Intended offices of transit (and country)	50 Principal No	Signature:		C OFFICE OF DEPARTURE			
	represented by						
	Place and date:						
52 Guarantee not valid for				Code	53 Office of destination (and country)		

J CONTROL BY OFFICE OF DESTINATION	54 Place and date:		
Signature and name of declarant/representative:			

7

Statistical copy — Country of destination

2 Consignor/Exporter No		1 DECLARATION	
<div></div>		3 Forms	4 Loading lists
		5 Items	6 Total packages
		7 Reference number	
8 Consignee No		9 Person responsible for financial settlement No	
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		12 Value details	
		13 CAP	
14 Declarant/Representative No		15 Country of dispatch/export	
		15 C disp. /exp. Code	
		17 Country destin. Code	
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		17 Country of destination	
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		45 Adjustment		
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47 Calculation of taxes	Type	Tax base	Rate	Amount	MP	48 Deferred payment	49 Identification of warehouse
	Total:						

B ACCOUNTING DETAILS

50 Principal No	Signature:		C OFFICE OF DEPARTURE	
51 Intended offices of transit (and country)	represented by			
	Place and date:			
52 Guarantee not valid for				
J CONTROL BY OFFICE OF DESTINATION				
				53 Office of destination (and country)
				54 Place and date:
				Signature and name of declarant/representative:

8

Copy for the consignee

8

2 Consignor/Exporter No		1 DECLARATION	
<input type="checkbox"/>		3 Forms	4 Loading lists
		5 Items	6 Total packages
		7 Reference number	
8 Consignee No		9 Person responsible for financial settlement No	
		10 Country last con- signed	11 Trad./Prod. country
		12 Value details	
		13 CAP	
14 Declarant/Representative No		15 Country of dispatch/export	
		15 C disp. /exp. Code	
		17 Country destin. Code	
		16 Country of origin	
		17 Country of destination	
18 Identity and nationality of means of transport on arrival		19 Ctr.	
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		46 Statistical value			

47 Calculation of taxes	Type	Tax base	Rate	Amount	MP	48 Deferred payment	49 Identification of warehouse
	Total:						
B ACCOUNTING DETAILS							

51 Intended offices of transit (and country)	50 Principal No				Signature:		C OFFICE OF DEPARTURE		
	represented by								
	Place and date:								
52 Guarantee								Code	53 Office of destination (and country)
not valid for									
J CONTROL BY OFFICE OF DESTINATION								54 Place and date:	
								Signature and name of declarant/representative:	

E CONTROL BY OFFICE OF DISPATCH/EXPORT																																		
Station/Company code			Port/Station of first lodgement if other than Port of Shipment																															
Examination at premises/warehouse <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> HCO only — compared with stock account <input type="checkbox"/> — compared with HO 16 </div> <div style="width: 45%;"> <input type="checkbox"/> Tobacco Products only — compared with TP8 <input type="checkbox"/> Compared with Excise Control Document </div> </div>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; height: 100px; vertical-align: top; padding: 2px;">Station reference</td> <td style="width: 70%; height: 100px; vertical-align: top; padding: 2px;">Date stamp</td> </tr> </table>			Station reference	Date stamp																											
Station reference	Date stamp																																	
*Not sampled *Sample forwarded to Government chemist			Signature																															
Examination at shipment			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 30px; vertical-align: top; padding: 2px;">Rotation number</td> </tr> <tr> <td style="width: 30%; height: 100px; vertical-align: top; padding: 2px;">Station reference</td> <td style="width: 70%; height: 100px; vertical-align: top; padding: 2px;">Date stamp</td> </tr> </table>			Rotation number		Station reference	Date stamp																									
Rotation number																																		
Station reference	Date stamp																																	
*Not sampled *Sample forwarded to Government chemist			Signature																															
Certificate of shipment		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 20%;">Deficiencies found</th> <th rowspan="2" style="width: 15%;">Number missing</th> <th rowspan="2" style="width: 15%;">Number broken</th> <th colspan="2" style="width: 50%;">Losses (Qty)</th> </tr> <tr> <th style="width: 25%;">Allowed</th> <th style="width: 25%;">Chargeable</th> </tr> </thead> <tbody> <tr> <td>Bottles</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Cases</td> <td></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div></td> <td></td> <td></td> </tr> <tr> <td>Casks</td> <td></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div></td> <td></td> <td></td> </tr> <tr> <td>Bulk</td> <td style="text-align: center;"><div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div></td> <td></td> <td></td> </tr> <tr> <td>Packages For tobacco products only</td> <td></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div></td> <td></td> <td></td> </tr> </tbody> </table>	Deficiencies found	Number missing	Number broken	Losses (Qty)		Allowed	Chargeable	Bottles					Cases		<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div>			Casks		<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div>			Bulk	<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div>	<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div>			Packages For tobacco products only		<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(45deg); transform-origin: center;"></div>		
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OPR—Quantities transferred to Box 19 of authorisation																																		

Name and address for return of this copy

*Delete as necessary

56 Other incidents during carriage
Details and measures taken

G CERTIFICATION BY COMPETENT AUTHORITIES

I CONTROL BY OFFICE OF DESTINATION (COMMUNITY TRANSIT)

Date of arrival:

Examination of seals:

Remarks:

Copy no 5 returned
on
after registration under
No

Signature:

Stamp:

COMMUNITY TRANSIT -- RECEIPT (To be completed by the person concerned before presentation to the office of destination)

This is to certify that the document issued by the Customs office at
..... (name and country) under No.
has been lodged and that no irregularity has been observed to date concerning the consignment to which this document refers.

Stamp of
office of destination:

Date:

Signature:

