Exporter (Full Name & Address)

Fax No.

B.R. No. Tel. No.

THE HONG KONG GENERAL CHAMBER OF COMMERCE

Authorised by The Government of the Hong Kong Special Administrative Region to issue Certificates of Origin under the Protection of Non-Government Certificates of Origin Ordinance, 1967.

Reference Number
(For Official Use)

Consignee (if required)

A DECLARATION AND APPLICATION MADE BY AN EXPORTER FOR A CERTIFICATE OF ORIGIN - WITHOUT TRANSIT / WITH TRANSHIPMENT

As *Director/Proprietor/Partner/Principal Official of the above named exporting firm I hereby declare:-

(a) that I am duly authorised to make and sign this declaration on behalf of the above-named exporting firm.

(b) that the goods which are accurately and fully described below are of _____ origin and shipped without transit/with transhipment at Hong Kong.
(Place of Origin)

(c) that all the information I have given is true and correct.

Departure Date

Vessel/Flight/Vehicle No. | Place of Loading

Port of Discharge | Final Destination if on Carriage

* Delete wherever inapplicable

If the goods do not carry any labels or brand names the word "Nil" should be inserted ↓

Marks, Nos. and Container No.; No. and Kind of Packages; Description of Goods & HS Code	No. of Units & Unit Price	Total Value (FOB/C&F/CIF) (HK$)	Brand Names or Labels

Total No. of Item: | Total No. of *Cartons/Cases:

Warning: The maximum penalty for making a false declaration in an application for the issue of a Certificate of Origin or for substitution of goods in respect of a Certificate of Origin is $500,000 and two years' imprisonment.

Grand Total
FOB/C&F/CIF (HK$)

HKGCC Membership No. | Destination Country/Place & Code

Note 1 This application and declaration must be made personally by the proprietor or by a partner or principal official authorised by the firm or company exporting the goods.
Note 2 Any amendments to this form must be chopped and initialled by the respective applicant.

For Official Use Only

1 Issued Retrospectively ..... ☐

2 Endorsement of Invoices ..... ☐

3 Others ..... ☐

Remarks

Signatory's Name in Block Letters

Date & Signature & Company Chop