

ATTACHMENT IV

CERTIFICATE

OF

ORIGIN

CERTIFICATE OF ORIGIN

FREE TRADE AGREEMENT BETWEEN THE
CARIBBEAN COMMUNITY (CARICOM) AND THE
DOMINICAN REPUBLIC

1. Exporter's Name: Address:		2. Producer's Name: Address:		3. Importer's Name: Address:	
Registration Number		Registration Number		Registration Number	
Facsimile Number		Facsimile Number		Facsimile Number	
E-mail address		E-mail address		E-mail address	
4. Consignee's Name: Address:		5. Mode of Transport and Route		6. Port of Shipment	
Registration Number		7. Port of Discharge		8. Number and Date of Invoice	
Facsimile Number					
E-mail address					
9. Tariff Classification	10. Description of Goods	11. Quantity	12. FOB Value (US\$)		
13. Observations					
14. Declaration			15. Certification of Authorised Body		
<p>I/We declare that the goods covered by this declaration corresponding to the above-mentioned commercial invoice comply with the Rules of Origin under the Free Trade Agreement between the Caribbean Community (CARICOM) and the Dominican Republic</p> <p>Name and Signature of the Exporter/Producer:</p> <p>_____</p> <p>Place and Date: _____</p>			<p>I certify the accuracy of the current declaration. I now sign and affix the stamp of the Authorised Body in</p> <p>_____</p> <p>(Country)</p> <p>Certificate No. _____</p> <p>Authorised Signature: _____</p> <p>Place and Date of Issue: _____</p>		

Note: This form will not be considered valid if it has erasures, corrections or amendments.
Persons who furnish or cause to be furnished untrue declarations render themselves liable to penalties.

FREE TRADE AGREEMENT BETWEEN THE CARIBBEAN COMMUNITY
(CARICOM) AND THE DOMINICAN REPUBLIC

INSTRUCTIONS FOR FILLING OUT THE CERTIFICATE OF ORIGIN

In order to receive preferential tariff treatment, this Certificate must be completely filled out in a legible manner by the exporter of the goods. This Certificate must be tendered by the importer at the time of importation. Please print or type.

- Box No. 1: Fill in the full Corporate Name, Address, Registration, Facsimile Number and E-Mail Address of the Exporter
- Box No. 2: Fill in the full Corporate Name, Address, Registration, Facsimile Number and E-Mail Address of the Company producing the goods
Where the exporter and the producer are the same, the word "SAME" may be printed in Box No. 2
- Box No. 3: Fill in the full Corporate Name, Address, Registration, Facsimile Number and E-Mail Address of the Importer
- Box No. 4: Enter Consignee's Name, Address, Registration Number, Facsimile Number and E-Mail Address
Where the importer and the consignee are the same, the word "SAME" may be printed in Box No. 4
- Box No. 5: Enter Mode of Transportation and Route
- Box No. 6: Indicate Port of Shipment
- Box No. 7: Indicate Port of Discharge
- Box No. 8: Enter the Number and Date of the Commercial Invoice
- Box No. 9: Declare the Customs Tariff Classification of the Harmonised System (HS) at the six Digit Level of each good described
- Box No. 10: Give full description of goods
- Box No. 11: Indicate the Total quantity of the Goods to be Exported in Commercial Units, indicating the type of Commercial Unit in metric measurement
- Box No. 12: Register the FOB Value in US\$, of the goods to be Exported
- Box No. 13: This space can be used by the Authorised Body of the Exporting Country as well as by the Exporter, when clarifying or adding information that is considered necessary
- Box No. 14: This Box must be filled out and signed by the Export/Producer or his/her Legal Representative or Agent
- Box No. 15: This Box must be filled out by the Authorised Body which issues this document