160 WALES AVE, SUITE 100 TONAWANDA, NY 14150 TEL: 716-260-1580 FAX: 289-290-3036



BLANKET STATEMENT OF NON-REIMBURSEMENT OF ANTI-DUMPING

DUTIES FOR A SINGLE COMMODITY

DUTIES FOR A SINGLE COMINIODITY
Date:
Importer Name:
Importer Address:
Manufacturer's Name:
Manufacturer's Address:
Anti-Dumping Case Number:
I hereby certify that this company, corporation, proprietorship or individual has not received nor entered into any agreement or understanding for the payment or for the reimbursement to me, by the manufacturer, producer, selle or exporter of all or any part of the antidumping duties upon all shipments of:
Commodity:
Tariff Number:
Country of Origin:
Which have been and/or will be imported by this company.
This blanket applies to importations on or after through ¹ I further certify that U.S. Customs and Border Protection will be notified if there is any reimbursement of antidumping duties by the manufacturer, producer, seller, or exporter to the importing company at any time in the future.
SIGNATURE OF COMPANY OFFICIAL:
PRINTED OR TYPED NAME OF ABOVE OFFICIAL:
TITLE OF COMPANY OFFICIAL:

NOTE: AN OFFICER OF THE IMPORTING COMPANY MUST SIGN THIS CERTIFICATE. IT MAY NOT BE SIGNED BY A CUSTOMSHOUSE BROKER ON BEHALF OF THE CLIENT.

¹ The time period for a blanket certificate of reimbursement is either 12 months or the administrative review period, whichever is longer.

