



Government of the Federated States of Micronesia
Division of Customs & Tax Administration
Department of Finance & Administration
P.O. BOX PS 54
Palikir, Pohnpei FM 96941
Phone: (691) 320-5855/2826 Fax: (691) 320-5715



APPLICATION FOR MODIFICATION OR CANCELLATION

Manifest Declaration

1. Details of Applicant

Name of Carrier/Forwarder/Declarant:

Name of Consignee:

2. Details of BL/SAD

Voyage/SAD Ref number (Office/Reference/Year):

Bl/Item number:

What to modify or cancel:

3. Reason for Modification or Cancellation

Please provide reasons here:

(Note: Attach copy of the SAD declaration and other relevant documents such as Exemption letter, Credit memo, Invoice, Bill of Lading/Air Way Bill or any other important documents needed for verifications to this request)

If space is insufficient, please attach extra pages.

Person requesting modification/cancellation(signature):

Name:

Date:

For official use only

Approval

Application approved? Yes No

Authorized officer (signature):

Name:

Date:

Modification / Cancellation (Please circle)

Processed? Yes No

Processing officer (signature):

Name:

Date: