COMMON MONETARY AREA

FORM N.E.P.

DECLARATION IN RESPECT OF GOODS LEAVING THE COMMON MONETARY AREA WITHOUT THE ACCRUAL OF FOREIGN EXCHANGE PROCEEDS

THIS FORM MUST BE COMPLETED IN CAPITAL LETTERS AND IN DUPLICATE AND THE APPROPRIATE BLOCKS MUST BE MARKED WITH AN "X" IN RESPECT OF:—

1(a) ☐ GOODS TAKEN FROM THE COMMON MONETARY AREA BY RESIDENTS AND EMIGRANTS WHERE THE TOTAL INSURANCE VALUE EXCEEDS THE EQUIVALENT OF R2000.

AND/OR

(b) ☐ THE INSURANCE VALUE OF INDIVIDUAL ITEMS EXCEEDS THE EQUIVALENT OF R500.

2(a) ☐ OTHER GOODS SUCH AS GIFT PARCELS, ADVERTISING MATERIAL, GOODS RETURNED FOR REPAIR, SAMPLES, ETC. (FOR WHICH NO SALE PROCEEDS WILL ACCRUE) TAKEN OR SENT FROM THE COMMON MONETARY AREA WHERE THE TOTAL INSURANCE VALUE OF THE ITEMS EXCEEDS THE EQUIVALENT OF R50.

AND/OR

(b) ☐ GOODS DESPATCHED FOR ANALYSIS, TREATMENT, ASSAYING, ETC., AND SUBSEQUENT RETURN TO THE COMMON MONETARY AREA.

NOTES:

1. TRAVELLERS: (a) A GLOBAL FIGURE FOR CLOTHING IS SUFFICIENT EXCEPT FOR INDIVIDUAL ITEMS EXCEEDING AN INSURANCE VALUE OF THE EQUIVALENT OF R500 WHICH MUST BE SPECIFIED INDIVIDUALLY.
   (b) THE ORIGINAL FORM MUST BE RETAINED FOR CUSTOMS DECLARATION PURPOSES AT THE TIME OF RE-ENTRY INTO THE COMMON MONETARY AREA.
2. EMIGRANTS: GENERAL DESCRIPTIONS WILL SUFFICE SINCE INVENTORIES AND INSURANCE DOCUMENTS MUST BE EXHIBITED TO THE ATTESTING AUTHORISED DEALER.

NAME AND LOCAL ADDRESS OF OWNER

DESCRIPTION AND PARTICULARS OF GOODS	INSURANCE VALUE
TOTAL	

I/WE . . . . . THE OWNER AND EXPORTER, HEREBY DECLARE THAT THE VALUE STATED ABOVE IS THE INSURANCE VALUE OF THE GOODS AND THAT: (mark "X" in appropriate blocks)

☐ I/WE WILL NOT EXPORT ANY UNACCOMPANIED BAGGAGE.

☐ I/WE HAVE EXPORTED UNACCOMPANIED BAGGAGE (INSURANCE VALUE THEREOF R . . . . . .)

☐ I/WE WILL RETURN THE ABOVEMENTIONED GOODS TO THE COMMON MONETARY AREA WITH SIX MONTHS.

☐ I/WE WILL NOT RETURN THE ABOVEMENTIONED GOODS TO THE COMMON MONETARY AREA.

EXPLANATORY NOTE WHERE NECESSARY: . . . . . .

DAY	MONTH	YEAR
		19

. . . . . .
SIGNATURE OF OWNER OF THE GOODS

EXCHANGE CONTROL PERMISSION EXISTS IN TERMS OF

SECTION ..... OF THE EXCHANGE CONTROL RULINGS

OR

APPLICATION NO. .....OF...../...../.....

. . . . . .
SIGNATURE AND DESIGNATION OF BANK OFFICIAL

BRANCH MICR NO

STAMP OF ATTESTING AUTHORISED DEALER

STAMP OF CUSTOMS OFFICER

SIEN KEERSY VIR AFRIKAANS

MP 48 SARB•0598•10000•6294