

APPLICATION CUSTOMS POST AUDIT SYSTEM HIGHWAY CARRIER

1. COMPANY NAME:

2. ADDRESS:

3. CANADA BORDER SERVICES AGENCY (CBSA) HIGHWAY CARRIER CODE NUMBER:

- Are you currently acting as a post audit carrier in any other mode:

Yes _____

No _____

If so, under what mode:

Air _____

Rail _____

Container _____

4. WHAT DOCUMENTS DO YOU USE WHEN YOU REPORT TO CBSA BY HIGHWAY ?

5. WHERE ARE YOUR CBSA REPORTING DOCUMENTS MAINTAINED ?

6. LIST THE ADDRESS OF YOUR MAJOR HIGHWAY TERMINALS IN CANADA AND IN THE USA.
(Submit as attachments if necessary)

7. LIST MAJOR CANADIAN HIGHWAY CROSSING USED.
(Submit as attachments if necessary)

8. INDICATE THE NAME, THE TITLE AND THE TELEPHONE NUMBER OF COMPANY CONTACT FOR CUSTOMS PURPOSE.

9. SUBMIT AN ORGANIZATION CHART OUTLINING THE INTERNAL ORGANIZATION OF YOUR COMPANY, E.G., REPORTING RELATIONS AND FUNCTION FOR EACH AREA.
(Submit as attachments if necessary)

10. SUBMIT AN ORGANIZATION CHART OUTLINING THE RELATIONSHIPS WITH ASSOCIATED COMPANIES.
(Submit as attachments if necessary)

11. OPERATING INFORMATION

(a) Number of years in the transportation industry: _____

(b) Do you have any customers on the Prearrival Review System (PARS) or on the Inland Prearrival Review System (INPARS) ?

Yes _____

No _____

- if yes, what percentage of your operations do they represent ? _____ %

(c) Other than PARS shipments, indicate:

- the approximate number of shipments cleared annually at the border: _____

- the approximate number of shipments cleared annually inland: _____

(d) Percentage of import shipments handled on the basis of shipper's load and count: _____ %

12. EQUIPMENT INFORMATION. (Submit as attachments if necessary)

Vehicle Type

Canadian Duty Paid - Number of Vehicle(s)

Non-Duty Paid - Number of Vehicle(s)

13. LIST MAJOR INTERLINE CARRIERS IN CANADA, BY NAME AND ADDRESS.
(Submit as attachments if necessary)

14. LIST MAJOR CANADIAN CUSTOMERS FOR IMPORT SHIPMENTS REPRESENTING AT LEAST 10% OF YOUR TOTAL NUMBER OF SHIPMENTS.
(Submit as attachments if necessary)

NAME AND ADDRESS % OF TOTAL NUMBER OF SHIPMENTS

15. ACCOUNTING SYSTEM

- (a) What is your fiscal year ? _____
(b) Type of accounting system:
(i) computerized ? _____
(ii) manual ? _____
(iii) both ? _____
(c) If computerized, what software package/program is used ?

16. DESCRIBE THE INTERNAL CONTROL SYSTEM UTILIZED FOR THE IMPORTATION OF COMAT (COMPANY OWNED MATERIAL). (Submit as attachments if necessary)

17. DESCRIBE THE INTERNAL CONTROL SYSTEM UTILIZED FOR REPAIRS MADE OUTSIDE CANADA TO CANADIAN / DUTY PAID EQUIPMENT. (Submit as attachments if necessary)

18. ATTACH COPIES OF ALL RELEVANT LICENSING AUTHORITIES REQUIRED TO OPERATE IN CANADA AND IN THE UNITED STATES

I certify that the information provided in this application is correct and should the company be granted post audit privileges, we will comply with all CBSA laws and regulations.

I also certify that the Transportation and End-Use Auditors of CBSA, will be granted access to all books and records they require for audit purposes, both for the facilitation audit and any subsequent verification audits to ensure compliance with CBSA laws and regulations.

- SIGNATURE OF OFFICER OF THE COMPANY

- TITLE

- DATE

This application does not constitute authority to act as a post audit carrier.
Only a letter issued by Carrier and Cargo Policy Section, Import Process Division, constitutes such authority.