

**DOC.450-1 CLEARING & DELIVERY INSTRUCTIONS**

 P O Box 2987  
**JOHANNESBURG**  
 2000  
 TEL: (011) 409-0300  
 FAX: (011) 409-0650

 P O Box 4818  
**DURBAN**  
 4000  
 TEL: (031) 365-2200  
 FAX: (031) 304-3788

 P O Box 928  
**PORT ELIZABETH**  
 6000  
 TEL: (041) 581-6000  
 FAX: (041) 581-0353

 P O Box 3095  
**CAPE TOWN**  
 8000  
 TEL: (021) 418-3218  
 FAX: (021) 425-3515

 P O Box 7211  
**EAST LONDON**  
 5200  
 TEL: (043) 721-1045  
 FAX: (043) 721-1049

<b>IMPORTER</b> _____ _____ _____	<b>DATE</b> _____ <b>CLIENT REF.</b> _____ <b>RÖHLIG-GRINDROD REF.</b> _____
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Vessel _____	Voy No. _____	B/L No. _____	E.T.A _____
No of Pcls/Cont. _____	Cont. No. _____	Port to Clear _____	

**(A) ENCLOSURES** (Mark X as necessary)

<input type="checkbox"/> Commercial Invoice	<input type="checkbox"/> Copy Bill of Lading	<input type="checkbox"/> DA 59
<input type="checkbox"/> Negotiable Bill of Lading (FCR, FBL or House B/L)	<input type="checkbox"/> Insurance Certificate	<input type="checkbox"/> OTHER
<input type="checkbox"/> Packaging List	<input type="checkbox"/> OTHER	

**(B) DELIVERY INSTRUCTIONS**

<input type="checkbox"/> Road from Coastal Port _____	<input type="checkbox"/> Removal in Bond to: _____
<input type="checkbox"/> Rail to Station/Siding _____	<input type="checkbox"/> Railage Description _____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Rail Ledger Account No. _____

**(C) FOR DESPATCH/DELIVERY TO:** \_\_\_\_\_

**IF OVERBORDER:** Please state Clearing Agent in country of destination under "Special Instructions"

**(D) MARINE INSURANCE**  
 Do you want Röhlig-Grindrod to insure this consignment?  Y  N  
 GOODS ARE NOT INSURED BY RÖHLIG-GRINDROD UNLESS THEY HAVE BEEN SPECIFICALLY INSTRUCTED

**(E) VAT**  
**VAT REGISTRATION NUMBER** \_\_\_\_\_ **CUSTOMS CODE NUMBER** \_\_\_\_\_  
 Importer to claim Input VAT on VAT201  Y  N

**(F) ACCOUNTS** Debit all charges to and return all documents to us or, \_\_\_\_\_

**(G) SPECIAL INSTRUCTIONS**

**(G1)**  New Goods  Used Goods  Second Hand Goods  Waste  Scrap

**(H) IMPORT PERMIT NO** \_\_\_\_\_ **BALANCE: R** \_\_\_\_\_ **CUSTOMS OFFICE (Place)** \_\_\_\_\_

**(I) CUSTOMS TARIFF ITEM** \_\_\_\_\_ **Costing required?**  Y  N

**(J) 01 PURPOSE CODE**

<b>A</b> Home use (DP / Duty free / GR) SCH 4	<b>J</b> Inward Processing (GR) 4701.1/2/3 & 498.00
<b>B</b> National / International Transit (RIB / RIT)	<b>K</b> Processing for Home use (IR) SCH 3
<b>D</b> Temporary Admission (GR)	
<b>E</b> Customs Warehousing (WH / WE)	

**02 DESTINATION CODE**

<b>ZA</b> SOUTH AFRICA	<b>NA</b> NAMIBIA	<b>SZ</b> SWAZILAND
<b>BW</b> BOTSWANA	<b>LS</b> LESOTHO	

**03 TARIFF DETERMINATION**

<b>A. PUBLISHED DETERMINATION</b> TDN NO. ....	<b>B. UNPUBLISHED DETERMINATION</b> Ref:..... Date..... Place of Issue ..... T/Hdg.....
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**04 CUSTOMS VALUATION**

<b>VALUATION CODE</b>	<b>VALUATION METHOD</b>	<b>VDN NO.</b>	<b>MARK UP</b>	<b>ACCEPT INV.</b>						
<b>R</b> <input type="checkbox"/> RELATED	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td></tr> </table>	1	2	3	4	5	6	_____	_____%	<input type="text"/>
1	2	3								
4	5	6								
<b>N</b> <input type="checkbox"/> NOT RELATED										
<b>E</b> <input type="checkbox"/> EXEMPT										

I, \_\_\_\_\_ AN EMPLOYEE OF THE IMPORTER, CERTIFY THAT I HAVE THE AUTHORITY TO ISSUE THESE CLEARING INSTRUCTIONS.

\_\_\_\_\_ SIGNATURE AND CO. RUBBER STAMP \_\_\_\_\_ DATE

All business undertaken subject to the standard trading conditions of The South African Association of Freight Forwarders

KINDLY REFER TO IMPORTANT NOTES OVERLEAF

## IMPORTANT NOTES

### 1. GENERAL

To avoid delays and misunderstandings which may give rise to additional costs, please complete this form fully and accurately. The headlines and sections (A), (B), (C), (D), (E), (H), (I) and (J) must all be completed. Sections (F) and (G) should be completed when necessary. If in doubt, please telephone us.

### 2. BILL OF LADING

- (a) Bills of Lading are issued with a certain number of copies (usually three) signed by or on behalf of the master of the vessel and each is regarded as an "Original". Please check that the one you send to us is one of these originals
- (b) The Bill of Lading shows the name of the party to whose order the goods are shipped and this usually appears under "Consignee". It must be endorsed by that party and if shipped to "order" it must bear the endorsement of the party shown as "Shipper".
- (c) If only an unsigned copy Bill of Lading is available, or none at all, it is still possible to obtain release ex ship by arranging a guarantee through your bank. If in doubt, seek our advice.

### 3. INVOICES

To comply with Customs requirements, please submit supplier's Commercial Invoice in duplicate. If none are available, please indicate under "Special Instructions" overleaf that we may make a Provisional Payment (Deposit) to Customs on your behalf, pending later submission of these invoices. Then obtain the invoices from your Supplier by airmail and let us have them with all speed so that the Provisional Payment may be recovered from Customs.

### 4. HAZARDOUS / DANGEROUS GOODS

If the consignment to be cleared under these instructions contains hazardous/dangerous goods, it is essential that you ensure that accompanying documents clearly indicate that fact. The nature of the goods, Codes and Classes must be stated in terms of the dangerous goods index, as published by the International Maritime Organisation.

### 4. COVERING STATEMENT

This is usually available when goods are shipped through a Confirming House. When not available, Customs invariably call for proof of the amount paid in the form of a copy of the bank draft or bank conversion slip and it is a good idea to supply copies of one or both in any case.

### 5. GOODS FOR CLEARANCE UNDER REBATE OF DUTY

When all or any part of consignment is for clearance under Rebate of Duty, please be certain to complete the appropriate portion of section (J).

### 6. DESPATCH INSTRUCTIONS (B) AND (C)

- (a) We require the full delivery/consignee's name and address and when goods are to be railed the account no, and name of the destination station must be included.
- (b) When instructing us to consign to a Siding, please check that the consignee shown has rights for that particular siding.
- (c) Not all stations are covered by the S.A.T.S Priority Services. If unsure about any particular station, please check with us.
- (d) For delivery overborder, please make sure that you have indicated the clearing agent who will take over the cargo in the country of destination.

### 7. MARINE INSURANCE

This will only be effected by us on your behalf when clearly indicated in section (D) overleaf, ie. as per The South African Association of Freight Forwarders' Trading Terms and Conditions as adopted by Röhlig-Grindrod (Pty.) Ltd., which reads as follows:

The company shall endeavour to effect any insurance the customer timeously and in writing instructs it to effect. Such insurance will be subject to such exceptions and conditions as may be imposed by the insurance company or underwriter taking the risk and the company shall not be obliged to obtain separate cover for any risks so excluded. Unless otherwise agreed in writing the company shall not be under any obligation to obtain separate insurance in respect of separate consignments but may insure all or any of such consignments under any open or general policy held by the company from time to time. Should any insurer dispute its liability in terms of any insurance policy in respect of any goods, the customer concerned shall have recourse against such insurer only and the company shall not have any responsibility or liability whatsoever in relation thereto notwithstanding that the premium paid on such policy may differ from the amount paid by the customer to the company in respect thereof. Insofar as the company agrees to arrange insurance the company acts solely as agent for and on behalf of the customer.

**IF IN DOUBT ABOUT ANY ASPECT OF YOUR INSTRUCTIONS TO US PLEASE SEEK OUR ADVICE**