بسم الله الرحمن الرحيم

Maldives Customs Service
Republic of Maldives

IMPORTER/EXPORTER REGISTRATION FORM

Details of Import/Export Permit.

Issued Name
Permit Number
Shipping Mark

Importer/Exporter Contact Details

Contact Number (Office)
Contact Number (Residence)
Contact Number (Mobile)
Fax Number
Email Address
website

Postal Address

Postal Address
Town or city
Province
Postal Code
Country

Contact Person's Information

Full Name
Street Address
Town/city
I.D Card Number
Contact Number (Mobile)
Company Reg. No
Contact Number (Office)
Contact Number (Residence)

Activity: *Please tick* Import ☐ Export ☐ Both ☐

Sector: *Please tick* Private ☐ Government ☐ Public ☐ Tourism ☐

I/We hereby confirm that all information and particulars stated herein are correct and true

Applicant's Signature. | Date | Organization / Company seal

Documents Required:

1. Original of Import/Export Permit issued from Ministry of Economic Development.
2. Original of the Company's Registry.

FOR OFFICIAL USE ONLY

Entered by:

Name:
Designation:
Service No:
Date:
Sign:

Registered by:

Name:
Designation:
Service No:
Date:
Sign:

Customs Seal

MCS-120/30-10-2010