

UNACCOMPANIED PERSONAL EFFECTS STATEMENT



- This is a legally binding document and may be used as evidence.
- This statement must be completed in English (block letters),
- with all errors and alterations to be initialled.

WARNING

Do **not** carry drugs. Penalties for drug offences in Australia are severe. A **false** or **misleading** statement

to a Customs Officer is an offence and may involve heavy penalties, including forfeiture of any goods concerned.

NOTICE

The Privacy Act 1988 says we must tell you why we are collecting this information, how we will use it and whether you have to give it to us. This information is required to ensure travellers comply with Australian Customs, Quarantine, Health, Wildlife and Currency laws. We require this information under the Customs Act 1901, the Quarantine Act 1908, the Wildlife Protection (Regulation of Exports and Imports) Act 1982 and the Financial Transaction Reports Act 1988. Customs also need the information to calculate the right amount of duties and taxes. Any questions you do not answer will be asked by a Customs or Quarantine Officer. The Australian Customs and Quarantine Services are not permitted to disclose this information or any supplementary information you give, except when authorised or required by law.

Please complete the following details								
Given names				Family nam	ne			
Address and telephone number of intended or actu	SS		Date of birt	h				
Sex Male Female Passport numb	ber	er Country of			issue			
Persons covered by this statement: Myself Spouse								
Spouse passport number	Number of children	umber of children under 18 years of age						
How I arrived or intend to arrive in Au	stralia							
On (airline flight number or ship name)			At (port or airport)					
Date, or estimated date, of arrival	Country of departure			-				
For returning residents only								
Other countries visited				Period of al	bsence from Australia			
How my personal effects arrived or wi	II arrive							
By Mail; or By Air; or By Sea (if by	v air or sea then complete belo	w)						
The (number of packages)	consigned to me have arrived or are due to arrive:							
On (airline flight number or ship name)	At (port or airport)		Date, or estimated date, of arrival					
Container number	Sea Bill or Air Waybill number	Air Waybill number Name of		local business handling your personal effects				
Clearing your personal effects You may clear your personal effects or pay a licence Alternatively, you may nominate somebody else (eg If you wish to nominate somebody else, you must fi	a family member or friend) to	act on your be		below.				
Family name	Given na	ames						
Address			PI	hone number				
Your nominee will need to produce one of the follo of identification when clearing your goods through	wing forms Customs.							
Driver's licence number Place of issu	le Or	Passport number C		Country of issue				
Declaration								

I declare that the above particulars are to the best of my knowledge true and correct.

Signature of owner

Date

Important

You must answer each of the following questions by placing a tick (\checkmark) in the appropriate boxes. If you mark YES in any box in sections three to eight, or if you are in doubt whether any particular effects should be declared, please give details in the space provided under each question or on a separate attachment if the space is insufficient. Unaccompanied effects may be examined. Please ensure that keys are available at the time of clearance.

Section One							
Have you come or are you coming to Australia							
As a tourist only	y? ➔ [^F	Please provide your le	ength of sta	ау			
To take up temp	porary reside	ence only? →	Please pro	wide your length of stay			
To resume perm	nanent resid	lence or as a returnin	g Australia	n citizen?			
To take up pern	manent resid	ence for the first time	?				
As an Australia	n citizen resi	iding overseas, returr	ning tempor	rarily?			
Section Two Did you pack the goods yourself? Yes							
□ No → [If no, name o	of person who did					
Are you fully aware of the contents of the packages?							
□ No → □	If not, why n	ot					
Do the packages cont you or those who acc							
Yes 🗲 🏾	Name			Passport number		Relationship to you	
No No							
Section Three Do your unaccompanied effects contain any of the following restricted goods? Drugs of any kind including, but not limited to: DHEA, narcotics, hallucinogens, amphetamines, barbiturates, tranquilisers, steroids or performance enhancing drugs. Yes No							
If yes, please provid	de a list of th	ne goods					
Weapons including, but not limited to: firearms or parts (including air pistols and air rifles), ammunition, replica firearms, spring bladed knives, daggers, knuckle dusters or martial arts equipment. Yes No If yes, please provide a list of the goods							
Articles manufactured from wildlife including, but not limited to: reptiles/snakes, elephants,							
rhinoceri, members of the cat family, whales, dolphins, zebras, antelope, deer or coral.							
If yes, please provide a list of the goods							
Material which is likely to cause offence to a reasonable adult. This may include, but is not limited to: <i>child pornographic material, child abuse material, material which may promote, incite or instruct in matters of crime or violence or misuse of a drug, or sexual material (including bestiality).</i> Yes No							
If yes, please provide a list of the goods							
I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.							
Signature of owner	estions cont	tained in this form a	nd the ans	swers to those questions	are true and corre	ect.	e

Section Four						
Do your unaccompanied effects contain any of the following goods?						
Australian and/or Foreign currency in the amount of \$10,000 Australian or more.						
If yes, please list the amount(s) in Australian dollars						
Medicines (whether prescribed by a medical practitioner or not) including but not limited	to: herbal.					
Yes No						
If yes, please provide a list of the goods						
Section Five Do your unaccompanied effects contain any of the following goods? If you tick 'yes	e' to any question, describe the good	s in the table below				
Cigarettes, cigars or tobacco	s to any question, describe the good	s in the table below.				
Yes No						
Alcoholic liquor including: spirits, wine or beer.						
Yes No						
Motor vehicle, motorcycle, trailers or watercraft.						
Yes No						
Goods belonging to any person other than you or those who accompanied you on your ar	rrival in Australia.					
Yes No						
Goods for commercial purposes, including goods for sale, lease, hire or exchange.						
Yes No						
Other goods owned by you for less than 12 months.						
Yes No						
If insufficient space, attach a separate sheet						
Description	Price or estimated price \$AUS	Date of purchase				
Description		Date of purchase				
IMPORTANT NOTICE: Any goods owned by you for less	s than 12 months must b	e declared.				
Such goods will be assessed for duty and taxes. Penalties exist for not declaring such goods.						
Direct enquiries to your local Customs Information Centre on 1300 363 263.						
Section Six Within one month prior to shipping these effects to Australia, did you or any member of your family who						
arrived or will arrive with you, visit a place where farm animals are kept, including farming communities,						
research farms, sanctuaries and sale yards or visit an abattoir or any meat processing plant?						
Yes No						
I declare that the above particulars are to the best of my knowledge true and corre understood the questions contained in this form and the answers to those questio						
		Date				

Section Seven					
Do your unaccompanied effects contain any of the following goods, subject to anima		t and import laws?			
Animals alive or dead including mammals, reptiles, fish, birds, insects or parts thereof or A feathers, skins, horns, shells, hatching eggs, semen or embryos.	nimal Products including:				
Yes No					
If yes, please provide a list of the goods					
Food of any kind (including any edible item) such as:					
meat, poultry, eggs, dairy products, baby food, spreads and sauces, beverages and non-alc	oholic drinks.				
Yes No					
If yes, please provide a list of the goods					
Equipment used with horses or other animals including:]			
saddles, harnesses, whips, collars, brushes, blankets or rugs used as animal bedding.					
Yes No					
If yes, please provide a list of the goods					
Biological specimens including:					
vaccines, cultures, blood, cell samples or cell lines, semen or embryos.					
Yes No					
If yes, please provide a list of the goods					
Section Eight					
Do your unaccompanied effects contain any of the following goods, subject to plant of	juarantine laws?				
Plants or parts of plants live or dead including: <i>fruits, nuts, seeds, bulbs, leaves, wooden articles or articles made of plant material, cuttings</i>					
flowers, mushrooms, fungi, straw, bamboo, herbs or teas.	,				
Yes No					
If yes, please provide a list of the goods					
Furniture or other articles of wood, cane or bamboo.					
Yes No					
If yes, please provide a list of the goods					
Soil or earth or goods containing soil, earth, rock or mineral samples.					
Yes No					
If yes, please provide a list of the goods					
Straw or wood packing material other than wood shavings or sawdust.					
Yes No					
Egg or fruit cartons used in packing.					
Yes No					
I declare that the above particulars are to the best of my knowledge true and correct understood the questions contained in this form and the answers to those questions					
Signature of owner		Date			
FOR OFFICIAL USE ONLY Coode declared Action taken]			
Goods declared Action taken					

ICD number: