

**TREASURY DEPARTMENT  
U.S. CUSTOMS SERVICE**

**SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND  
HOUSEHOLD EFFECTS**

1. OWNER OF HOUSEHOLD GOODS  
(Last name, first and middle) \_\_\_\_\_
2. DATE OF BIRTH: \_\_\_\_\_ 3. CITIZENSHIP: \_\_\_\_\_
4. PASSPORT (Country and Number): \_\_\_\_\_
5. SOCIAL SECURITY No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ 6. RESIDENT ALIEN No.: \_\_\_\_\_
7. CURRENT ADDRESS (USA)  
(Street address, City, State Zip): \_\_\_\_\_
8. FOREIGN ADDRESS (Outside USA)  
(Street address, City, State Zip): \_\_\_\_\_
9. REASON FOR MOVING: \_\_\_\_\_
10. EMPLOYER: \_\_\_\_\_
11. POSITION WITH EMPLOYER: \_\_\_\_\_
12. LENGTH OF EMPLOYMENT: \_\_\_\_\_ 13. NATURE OF BUSINESS: \_\_\_\_\_
14. NAME AND TELEPHONE OF COMPANY OFFICIAL WHO CAN VERIFY ABOVE  
INFORMATION: \_\_\_\_\_
15. NAME AND ADDRESS OF FREIGHT FORWARDERS, PACKERS OR SHIPPING AGENTS:  
\_\_\_\_\_  
(Name, Address)  
\_\_\_\_\_  
(Name, Address)
16. SHIPMENT ITINERARY  
(Specify place of landing and intermediate ports): \_\_\_\_\_
17. CERTIFICATION: (A) (  ) AUTHORIZED AGENT (B) (  ) IMPORTER **(CHECK ONE)**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_