Submit in Triplicate

APPLICATION FOR RELEASE OF GUARANTEES

FORM-TIEP 5

	Name and address of Applicant Tel no:	Date Year Month Date	Application For Year Ending TIEP Approval Number
		Tin	Date of Approval
	Address of workshop / Factory	Type ☐ Exporter ☐ Bank Guarantee ☐ Indirect Exporter ☐ Exporter Guarantee	
	If there was a short fall Exports state reason	Bank/Exporter Guarantee to be released No of Bank No of Bank No of Bank No of Bank	
Export	Export Product	Production Volume	Production Value
		Export Volume %	Export Value %
Imports	Items Imported	Quantity	CIF Value
	Date of Import / Date Of Commencement Of Production	Total Value Of Imports	
	AUDITORS CERTIFICATE We certify that the information given above by the Exporter is true and correct according to documents furnished to us by Exporter. Name and address Signature Seal Date	The undersigned apply for release of the above Guarantee/s and declare that the ownership of items imported has not changed and that all particulars given above are true and correct. Name of Authorised Signatory:	
	Recommend the charge of ☐ Bank ☐ Personal Guarantees issued in this connection/Extension of the Guarantee by a period of ……months. PTO for information /letter of request Designation Signature ……. …… Date ……. Export Facilitation Unit Sri Lanka Customs Bristol Street Colombo 01	Designation …… Signature ……	