



**GOVERNMENT OF THE BAHAMAS
EXIGENCY ORDER OF SEPTEMBER 2ND, 2019
HURRICANE DORIAN
FORM (B)
IMPORTATION OF RELIEF GOODS
FOR THE PERIOD 2ND SEPTEMBER, TO 2ND OCTOBER, 2019**

Name of Importer: _____ / _____
Last Name First Name

Business Name (If Applicable) _____

National Insurance #/Business TIN: _____

E-mail: _____ Telephone (Cell/Work): _____

Address: _____

Relief Goods being imported.

Description of Item	Quantity

Items to be approved by the Ministry of Finance

Any person who knowingly imports any goods, pursuant to this Declaration, but for the purpose other than as specifically provided for under the Declaration commits an offence and is liable to penalties and forfeiture of goods in accordance with Sections 268 and 292, of the Customs Management Act.

I certify that the above information that has been provided is true.

Signature of Applicant

Date