To,

The Commissioner of Customs (Port/Destination)

We M/s ………………………………….. IEC No , authorize UPS JET AIR EXPRESS PVT LTD

to custom clear all import, commercial and non-commercial shipments which arrives in UPS network.

We respectfully request that you allow UPS to handle all the necessary documents and actions for the customs clearance process of all our import shipments.

Further we would like to inform you that the imported goods fully comply with Customs rules and regulations and any other regulations currently in force for import/export shipments.

Yours Faithfully, (Sign)

(Signing Authority Name and Designation)

**Know Your Customer (KYC) Form for CHA**

**-Company-**

|  |  |
| --- | --- |
| **Name of Company Principal Place of Business** |  |
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|  |
| PAN Number | IEC Number |
| Telephone | Mobile |
| Fax |  Email  |  |  |
| **Mailing Address**Name: |  |
| Address |
|  |
|  |
| City | State |
| Telephone | Mobile |
| Fax | Email |
|  |
| **Authorized Signatory** |  |
| Name: |  |  |
| Date of Birth | Sex | Please paste a |
| most recent |
|  |
| Address | Photograph ofAuthorized |
|  |
| Signatory |
|  |  |
|  |  |
| City | State |  |
| Telephone | Mobile |
| Fax | Email |
|  |

**Documents Required**

O Certificate of Incorporation

O Power of Attorney

O Memorandum of Association

O Copy of PAN Allotment

O Articles of Association

O Copy ofTelephone Bill

Know Your Customer (KYC) Form for Company: A Softlink initiative

|  |  |
| --- | --- |
|  |  |
| **Authorized Signatory** |  |  |
| Name: |  |
| Date of Birth | Sex | Please paste a most recent Photograph of AuthorizedSignatory |
| Address |
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| City | State |  |
| Telephone | Mobile |
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Know Your Customer (KYC) Form for Company: A Softlink initiative

**Oiclaimer. Thisform is being provided as a partof Softtinklogistic Systems ?vt ltd'CSR inftialive. Whileanttnpt h** **s.b@enmadeto capti.Jre** **all the informati-on as perthe Cu tomscircular on the KYCguldelln s.t,o th!!bestof oor**

**knowledge, it is the reponsibility of theuser to ensure thataltinformation relating to theguidellMS arecollected. Softlink Logi ticSys.temsPvt Ltd isnotliable foranydamagesorloss rising fromthe use of th@form.**

|  |  |  |
| --- | --- | --- |
| **Form of****organization** | **Features to be verified** | **Documents to be obtained****(Any two of the documents listed)** |
| Individual | 1. Legal name and any other names used
2. Present and Permanent address, in full, complete and correct.
 | 1. Passport
2. PAN card
3. Voter’s Identity card
4. Driving license
5. Bank account statement
6. Ration card
 |
| Company | 1. Name of the company
2. Principal place of business
3. Mailing address of the company
4. Telephone, fax number, e-mail address.
 | 1. Certificate of incorporation
2. Memorandum of Association
3. Articles of Association
4. Power of Attorney granted to its managers, officers or employees to transact business on its behalf
5. Copy of PAN allotment letter
6. Copy of telephone bill
 |
| Partnership firm | 1. Legal name
2. Permanent address, in full, complete and correct.
3. Name of all partners and their addresses, in full complete and correct.
4. Telephone, fax number, e-mail address of the firm and partners.
 | 1. Registration certificate, if registered
2. Partnership deed
3. Power of Attorney granted to a partner or an employee of the firm to transact business on its behalf
4. Any officially valid document identifying the partners and the person holding the Power of Attorney and their addresses
5. Telephone bill in the name of firm/ partners
 |
| Trusts, Foundations | 1. Name of trustees, settlers, beneficiaries and signatories
2. Name and address of the founder, the managers, Directors and the beneficiaries, in full, complete and correct.
3. Telephone and fax number, e- mail address of the trust, founder and trustees.
 | 1. Certificate of Registration, if registered
2. Power of Attorney granted to transact business on its behalf
3. Any officially valid document to identify the trustees, settlers, beneficiaries and those holding the Power of Attorney, founders/ managers/ directors and their addresses
4. Resolution of the managing body of the foundation/ association
5. Telephone bill
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