

INSTRUCTIONS FOR COMPLETING CUSTOMS POWER OF ATTORNEY

#	ENGLISH	SIMPLIFIED CHINESE(简体)	TRADITIONAL CHINESE (繁體)
(1)	Enter the Importer Number based on your entity type:	请按贵公司的实体性质填写进口商的海关报税号:	請按貴公司的實體性質填寫進口商的海關報稅號:
	EIN (Employer Identification Number): Corporation; Limited Liability Company (LLC); Limited Partnership (LP/LLP); General Partnership (GP); Sole Proprietorship; or Individual	<u>EIN(联邦雇主识别号/联邦报税号):</u> 股份合作公司:有限责任股份合作公司:有限合伙人公 司:普通合伙人公司:独资经营者:个人	<u>EIN(聯邦雇主識別號/聯邦報稅號):</u> 股份合作公司,有限責任股份合作公司,有限合夥人公 司,普通合夥人公司,獨資經營者,個人
	<u>SSN (Social Security Number):</u> Sole Proprietorship or Individual without an EIN	<u>SSN(社会安全号码):</u> 无联邦税号的独资经营者或是个人	<u>SSN(社會安全號碼):</u> 無聯邦稅號的獨資經營者或是個人
	CAIN (Customs Assigned Importer Number): Foreign Corporation or Individual (if none, leave blank)	CAIN(海关指派进口商报税号): 海外股份企业公司或是个人(如不适用无需填写)	CAIN(海關指派進口商報稅號): 海外股份企業公司或是個人(如不適用無需填寫)
	Foreign Importers of Record (Non-Resident) without an EIN or SSN, will require a CAIN. If you do not have a CAIN, we will apply for one on your behalf.	无联邦报税号或是社会安全号的海外进口商(非美国居 民),需提交 CAIN 号码。如果没有此号码,我司会协助办理。	無聯邦報稅號或是社會安全號的海外進口商(非美國居 民),需提交 CAIN 號碼。如果沒有此號碼,我司會協 助辦理。
(2)	Enter the full legal name of your entity. Name must be complete and abbreviations avoided. If a fictitious business or trade name is used (e.g., a "d/b/a") that name should also appear here.	请填写公司法定全名。公司名称必需完整,而且尽量避 免简写。如使用非法定的商业替代名称(如 d/b/a)作 为公司抬头 此名称需同时填写。	請填寫公司法定全名。公司名稱必需完整,而且盡量避 免簡寫。如使用非法定的商業替代名稱(如 d/b/a)作 為公司抬頭 此名稱需同時填寫。
	Corporation; or Limited Liability Company Enter the full legal name of the entity.	<u>股份合作公司;或是有限责任股份合作公司</u> 请填写公司法定全名。	<u>股份合作公司;或是有限責任股份合作公司</u> 請填寫公司法定全名。
	General Partnership; or Limited Partnership List the full names of all general partners, and enter the full business name of the partnership if any.	<u>普通合伙人公司;或是有限合伙人公司</u> 列出全体合伙人名称,如适用,请填写合伙公司的商业 全名。	<u>普通合夥人公司;或是有限合夥人公司</u> 列出全體合夥人名稱,如適用,請填寫合夥公司的商業 全名。
	Sole Proprietorship: or Individual Enter the full name of the owner.	<u>独资经营者;或是个人</u> 填写经营者,或是个人全名	<u>獨資經營者:或是個人</u> 填寫經營者,或是個人全名
(3)	Select your entity type.	请选择贵司实体性质。	請選擇貴司實體性質。
(4)	Enter the State of your entity's incorporation/formation or your principle place of business. If a foreign entity, enter the country and province in which it is doing business.	请填写贵司组建/注册,或是主要业务所在地的洲份。 如海外企业,需填写业务运营所在地的省份和国家。	請填寫貴司組建/註冊,或是主要業務所在地的洲份。 如海外企業,需填寫業務運營所在地的省份和國家。
(5)	Enter the complete address of your principal place of business or your corporate headquarters.	请填写贵司总部或是主要业务所在地的完整地址。	請填寫貴司總部或是主要業務所在地的完整地址。
(6)	Enter the same as (2).	填写内容应与第二项相同。	填寫內容應與第二項相同。
(7)	Acceptable POA signers are based on entity type. Duly Authorized Representatives are acceptable but must provide supporting authority.	授权书的合格签署人取决于公司的实体性质。可以是经 公司正式授权的代表,此代表需提供证明支持签署的合 法性。	授權書的合格簽署人取決於公司的實體性質。可以是經 公司正式授權的代表,此代表需提供證明支持簽署的合 法性。
	Corporation President; Vice President; Treasurer; Corporate Secretary; General Counsel; Chief Executive Officer (CEO); Chief Operating Officer (COO); Chief Financial Officer (CFO); Chief Information Officer (CIO); Chairman	<u>股份合作公司</u> 总裁;副总裁;财务长;行政秘书长;法律顾问;首席 执行官;首席运营官;首席财务官;首席资讯官;主席	<u>股份合作公司</u> 總裁;副總裁;財務長;行政秘書長;法律顧問;首席 執行官;首席運營官;首席財務官;首席資訊官;主席
	Limited Liability Company Manager for manager-managed LLC; Member for member- managed LLC	<u>有限责任股份合作公司</u> 管理经理;管理经理之成员	<u>有限責任股份合作公司</u> 管理經理;管理經理之成員
	<u>General Partnership: Limited Partnership</u> General Partner	<u>普通合伙人公司</u> :有限合伙人公司 合伙人	<u>普通合夥人公司;有限合夥人公司</u> 合夥人
	<u>Sole Proprietorship; Individual</u> Owner	<u>独资经营者;个人</u> 经营者;个人	<u>獨資經營者; 個人</u> 經營者; 個人
(8)	Enter the full printed name of the signing party.	填写签署人的正楷全名。	填寫簽署人的正楷全名。
(9)	Select the capacity of the signing party listed at (7).	按第七项内容选择签署人的头衔。	按第七項內容選擇簽署人的頭銜。
(10)	Enter the date on which the power of attorney was signed.	填写签署授权书的日期。	填寫簽署授權書的日期。
(11)	Signature of witness is optional, but may be required by the rules of your partnership or local laws.	见证人的签名是可选项,但需按具体合伙人公司规定或 是当地法律要求自行决定签署与否。	見證人的簽名是可選項,但需按具體合夥人公司規定或 是當地法律要求自行決定簽署與否。
(12)	Full printed name of witness is optional, but may be required by the rules of your partnership or local laws.	填写见证人的正楷名称属可选项,但需按具体合伙人公 司规定或是当地法律要求自行决定填写与否。	填寫見證人的正楷名稱屬可選項,但需按具體合夥人公 司規定或是當地法律要求自行決定填寫與否。



INSTRUCTIONS FOR COMPLETING INDIVIDUAL OR PARTNERSHIP CERTIFICATION (FOR U.S. ENTITY)

#	ENGLISH	SIMPLIFIED CHINESE(简体)	TRADITIONAL CHINESE(繁體)
	Individual <u>or</u> Partnership Certification is OPTIONAL, but recommended to expedite validation of your power of attorney.	填写个人或是合伙人的证书属可选项,但建议提交此证 书以加快授权书的审核进度。	填寫個人或是合夥人的證書屬可選項,但建議提交此證 書以加快授權書的審核進度。
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			如貴司選擇提交此證書,請僱用持牌公證為您代辦。公 證處有可能使用自行製定的證書表格填寫。

INSTRUCTIONS FOR COMPLETING NON-RESIDENT CERTIFICATION (FOR FOREIGN ENTITY)

#	ENGLISH	SIMPLIFIED CHINESE(简体)	TRADITIONAL CHINESE(繁體)
	Non-Resident Certification is REQUIRED for ALL Foreign Importers of Record.	海外企业作为进口商一律要求填写非美国居证书。	海外企業作為進口商一律要求填寫非美國居證書。
	Complete Section A if your foreign entity has more than one officer.	如海外企业拥有一位以上的行政长官请填写 A 部份。	如海外企業擁有一位以上的行政長官請填寫 A 部份。
	Complete Section B if your foreign entity only has a single officer.	如海外企业只拥有一位行政长官请填写 B 部份。	如海外企業只擁有一位行政長官請填寫 B 部份。

	Section A:	A 部份:	A 部份:
	Must be completed by an officer who is different than the party who signed the power of attorney.	需由非授权书签署人填写	需由非授權書籤署人填寫
(1)	Enter the full printed name of a second officer who is certifying that the officer who signed the power of attorney has the authority to sign on behalf of the entity.	填写企业第二行政长官的正楷全名,必需是非授权书的签 署人并且有资质证明授权书签署人的合法性。	填寫企業第二行政長官的正楷全名,必需是非授權書 的簽署人並且有資質證明授權書籤署人的合法性。
(2)	Enter the title or capacity of the officer who is signing this certification.	填写证书签署人的头衔。	填寫證書籤署人的頭銜。
(3)	Enter the full printed name of the officer who signed the power of attorney.	填写授权书签署人的正楷全名。	填寫授權書籤署人的正楷全名。
(4)	Enter the City where this certification is being signed.	填写证书签署所在地的城市名称。	填寫證書籤署所在地的城市名稱。
(5)	Enter the State or Province and Country where this certification is signed.	填写证书签署所在地的洲份,省份和国家。	填寫證書籤署所在地的洲份,省份和國家。
(6)	Signature of officer listed at (1) of Section A.	A 部份长官的签名。	A 部份長官的簽名。
(7)	Enter the date on which this certification was signed.	填写证书签署日期。	填寫證書籤署日期。

	Section B:	B 部份:	B 部份:
	Must be completed by the same party who signed the power of attorney.	需由授权书签署人填写。	需由授權書籤署人填寫。
	Enter the full printed name of the party who signed the power of attorney.	填写授权书签署人的正楷全名。	填寫授權書籤署人的正楷全名。
(2)	Signature of party who signed the power of attorney.	授权书签署人的签名。	授權書籤署人的簽名。
(3)	Enter the date on which the power of attorney was signed.	填写授权书的签署日期。	填寫授權書的簽署日期。



CUSTOMS POWER OF ATTORNEY Acknowledgement of Terms and Conditions of Service

IMPORTER NUMBER: (1)	
EIN (Employer Identification Number), SSN (Social Security N	umber), CAIN (Customs Assigned Importer Number), or if none, leave blank
Know all men by these presents that: (2)	npany, general partnership, limited partnership, sole proprietorship, or individual ("grantor"),
full name of corporation, limited liability con	npany, general partnership, limited partnership, sole proprietorship, or individual
doing business as a (3) Corporation; Limited Liability Company;	General Partnership; 🗌 Limited Partnership; 🗌 Sole Proprietor; 🗌 Individual
under the laws of the State or Province of (4)	, residing or having a principal place of business at
(5)	
street address (no P.O. Boxes), city, state, zip, and country	
	nd Floor, Jamaica, NY 11413), its officers, employees its officers, employees, and/or a true and lawful agent and attorney of the grantor for and in the name, place and stead lectronically, or by other authorized means, to:
connection with the importation, exportation, transportation, of any merchandise in or	
Perform any act or condition, which maybe required by law or regulation in connectio	
Make endorsements on bills of lading conferring authority to transfer title; make entr required by law or regulation for drawback purposes, regardless of whether such doc	y or collect drawback; and to make, sign, declare, or swear to any statement or certificate cument is intended for filing with Customs;
exported with or without benefit of drawback, or in connection with the entry, clearan	gulation in connection with the entry or withdrawal of imported merchandise or merchandise nce, lading, unlading or navigation of any vessel or other means of conveyance owned or id accepted under applicable laws and regulations, consignee's and owner's declarations ts in connection with the entry of merchandise;
Sign and swear to any document and to perform any act that may be necessary or a operation of any vessel or other means of conveyance owned or operated by said graders.	required by law or regulation in connection with the entering, clearing, lading, unlading, or antor;
Authorize other Customs Brokers duly licensed within the territory to act as grant grantor's name drawn on the Treasurer of the United States; if the grantor is a nonre:	tor's agent; to receive, endorse and collect checks issued for Customs duty refunds in sident of the United States, to accept service of process on behalf of the grantor;
And generally to transact Customs business, including filing of claims or protests und said grantor Is or may be concerned or interested and which may properly be transad	ler section 514 of the Tariff Act of 1930, or pursuant to other laws of the territories, in which cted or performed by an agent and attorney;
Giving to said agent and attorney full power and authority to do anything whatever r and acting, hereby ratifying and confirming all that the said agent and attorney shall l	requisite necessary to be done in the premises as fully as said grantor could do if present awfully do by virtue of these presents;
This power of attorney to remain full force and effect until revocation in writing is dul the said power shall in no case have any force or effect in the United States after the	ly given to and received by grantee (if the donor of this power of attorney is a partnership, expiration 2 years from the dates of its execution);
Broker transmit a copy of its bill for service directly to the importer, and authorizes the	Regulations and the requirement of 111.36 of the Customs Regulations that the Customs Customs Broker to transmit its bill for services and copies of the Customs entry documents rcial invoices, etc.) through Grantor's forwarder, if applicable. No part of this agreement or or other party in interest and the Customs Broker.
Grantor acknowledges receipt of and accepts Unipac Shipping, Inc.'s "Terms and Con liability and is incorporated herein by reference. Unipac Shipping, Inc.'s "Terms and Cor	ditions of Service" governing all transactions between the parties, which include limitations of nditions of Service" is available upon request and online at <u>www.unipacshipping.com</u> .
If the Grantor is a Limited Liability Company, the signatory certifies that he/she has full auth	nority to execute this power on behalf of the Grantor.
IN WITNESS WHEREOF, the said grantor,	
(6)	e proprietorship, or individual caused these presents to be sealed and signed:
Signature: (7)	_ Printed Name: (8)
Capacity: (9)	Date: (10)
Witness Signature: (11)	_ Witness Name: (12)

In accordance with 111.29 of the Customs Regulations, if you are the importer of record, payment to the broker will not relieve you of liability for U.S. Customs charges (duties, taxes or other debts owed U.S. Customs) in the event the charges are not paid by the broker. Therefore, if you pay by check, U.S. Customs charges may be paid with a separate check payable to the "U.S. Customs and Border Protection" which shall be delivered to U.S. Customs by the broker. Importers who wish to utilize this procedure must contact our office in advance to arrange timely receipt of duty checks.



INDIVIDUAL OR PARTNERSHIP CERTIFICATION BY NOTARY (FOR U.S. ENTITY) OPTIONAL, but recommended to expedite validation of your power of attorney.		
City:		
County:		
State/Province:		
On this day of appeared before me, the undersigned, personally known or su executed the foregoing Customs Power of Attorney and ackno	ifficiently identified to me, who certifies that he/she/they is/are the individual(s) who	
Notary Public	-	
 NON-RESIDENT CERTIFICATION (FOR FOREIGN ENTITY REQUIRED for ALL foreign importers of record. Complete Section A or Section B depending on numbers 		
Section A: FOREIGN ENTITY WITH MORE THAN To be completed by an officer who is diff	ONE OFFICER ferent than the party who signed the power of attorney.	
I, (1)	, certify that I am the (2)	
of the grantor and that (3)full name of party who signed the power of attor	who signed this power of attorney on behalf of the grantor has the	
authority to sign this power of attorney on behalf of the grantor IN WITNESS WHEREOF, I have hereunto set my ha		
(5) state or province and country where this certification is signed	city where this certification is signed	
Signature: (6)	Date: (7)	
Section B: FOREIGN ENTITY WITH A SINGLE OF To be completed by the same party who	-	
I, (1)	, certify that I am the sole officer and/or shareholder of the grantor.	
Signature: (2)	Date: (3)	