

## **Eswatini Revenue Service**

**CUSTOMS & EXCISE DEPARTMENT** 



Portion 419 of Farm 50, Along MR103, Ezulwini

Postal Address: P.O. Box 5628 Mbabane, Eswatini **Tel:** (+268) 2406 4000 **Contact Centre:** (+268) 2406 4050

SIGNATURE \_\_\_\_\_

Website: www.ers.org.sz

THIS FORM MUST BE COMPLETED BY ALL PRESONS ENTERING SWATE  (All values of goods declared must be in the currency in which the goods were purchased. Pieces indicate the currency as fload, USD, E, etc. as the case may be against each declaration. Please see overleaf for more information)  Full name  Physical address in Eswatini  Contact number  1. Indicate whether you are a VISITOR, RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR WISITOR WISITOR WISITOR RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below VISITOR WISITOR WIS	BAGGAGE DECLARATION (FORM	(I E) AND VAT REFUND FORM		
[All values of goods declared must be in the currency in which the goods were purchased. Please indicate the currency or Rand, USD, €, etc. as the case may be ogainst each declaration. Please see overled for more information.]  Full name		ERS REF NO.		
Physical addresss in Eswatini Contact number  1. Indicate whether you are a VISITOR, RETURNING RESIDENT or NEW RESIDENT by ticking the relevant box below NETURNING RESIDENT   NEW RESIDEN	(All values of goods declared must be in the currency in which the goods were purchased. Please indicate the currency as Rand, USD, €, etc. as the case may be			
VISITOR   RETURNING RESIDENT   NEW RESIDENT    2. Please enter the total cost of all goods purchased outside Eswatini which are zero rated or exempted from VAT in Eswatini  3. Please enter below the cost of all other goods purchased outside Eswatini:  Qty Value (indicate currency)  O1 Clothing  O2 Food stuff  O3 Household linen  O4 Electrical appliances  O5 Domestic hardware (non-electrical)  O6 Alcoholic beverages  O7 Other (speedfy)	Physical address in Eswatini	PIN Country of		
Ot Clothing  O2 Food stuff  O3 Household linen  O4 Electrical appliances  O5 Domestic hardware (non-electrical)  O6 Alcoholic beverages  O7 Other (specify)	VISITOR RETURNING RESIDENT NEW RESIDENT  2. Please enter the total cost of all goods purchased outside Eswatini which are zero rated or			
01 Clothing 02 Food stuff 03 Household linen 04 Electrical appliances 05 Domestic hardware (non-electrical) 06 Alcoholic beverages 07 Other (specify)	3. Please enter below the cost of all other goods purchased outside	Eswatini:		
02 Food stuff 03 Household linen 04 Electrical appliances 05 Domestic hardware (non-electrical) 06 Alcoholic beverages 07 Other (specify)		Qty Value (indicate current	:y)	
03 Household linen 04 Electrical appliances 05 Domestic hardware (non-electrical) 06 Alcoholic beverages 07 Other (specify)	01 Clothing			
04 Electrical appliances 05 Domestic hardware (non-electrical) 06 Alcoholic beverages 07 Other (specify)	02 Food stuff			
05 Domestic hardware (non-electrical) 06 Alcoholic beverages 07 Other (specify)	03 Household linen			
06 Alcoholic beverages 07 Other (specify)	04 Electrical appliances			
4. Are you carrying more than E15 000 or equivalent in cash or negotiable bearer instruments? (Please tick) YES NO Ledge that I have in my possession only goods of the quantities and values indicated; that I do not have any prohibited or restricted goods and that the above information is true and complete.  SIGNATURE	05 Domestic hardware (non-electrical)			
4. Are you carrying more than E15 000 or equivalent in cash or negotiable bearer instruments? (Please tick) YES NO Ledge that I have in my possession only goods of the quantities and values indicated; that I do not have any prohibited or restricted goods and that the above information is true and complete.  SIGNATURE.  DATE.  FOR OFFICIAL USE ONLY  Total Value  Receipt Number  Dated  OFFICER (NAME IN CAPITALS)  OFFICER (SIGNATURE)  Important Note: This tear off slip must be completed only when the VAT Refund MOU is applicable. This tear-off slip will be used to claim the VAT from South Africa and must therefore bear your correct and complete details. Please complete your details again and sign.  PIN  Passport number  Full name  Physical address in Eswatini  Port of entry  Date of entry  No. of invoices  I hereby request the ERS to apply for a refund of VAT paid in South Africa on the goods on the attached invoice(s) and authorize that	06 Alcoholic beverages			
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