

**DIPARTIMENT TAD-DWANA
XATT LASCARIS
VALLETTA VLT 1920. MALTA**



**CUSTOMS DEPARTMENT
LASCARIS WHARF
VALLETTA VLT 1920. MALTA**

A 2-day Binding Tariff Classification Course for interested **Economic Traders** is scheduled to be held on **24th and 25th March 2020**.

This course will give detailed guidelines for the Interpretation of the legally binding Combined Nomenclature, the HSEN and CNEN which support the CN, the BTI legally binding decision, the importance of the product literature, how to classify goods and EU Regulations. All are important tools that should be used by economic traders for the correct classification of goods when submitting NIS and NES Customs declarations. Trainers from the Customs Department will deliver the course.

Economic Traders interested to attend should fill in the attached form ([*hyperlink*](#)) and submit it by **NOT LATER THAN 24th FEBRUARY 2020**, to the Customs Training Unit on email address [**customs.training@gov.mt**](mailto:customs.training@gov.mt). Applications will be processed on a first-come first-served basis. An invitation e-mail will be sent to those applicants who show interest outlining details of course agenda.

Customs Training Unit
Research & Development Unit
Tel: 25685416/7/9

APPLICATION TO ATTEND FOR THE *BINDING TARIFF COURSE AND NOMENCLATURE*
ORGANISED BY THE CUSTOMS RESEARCH & DEVELOPMENT UNIT
(Form to be filled in by Private Sector and send it by email to customs.training@gov.mt)

1	Name & Surname of person who will attend:	
2	I.D./Passport No. of person who will attend:	
3	Name of Representing Company:	
4	E.O.R.I. No. (of Company declared above): <i>For more information re EORI No. follow this link:</i> https://customs.gov.mt/bus/economic-operators-registration-identification	
5	Company's Full Address:	
6	Company's Telephone No. & Mobile	
7	E-Mail Address of contact person:	
8	Can you follow lectures delivered in Maltese without difficulty.	<i>(Please tick where applicable)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO
9	Any other remarks:	

DATE.....
FULL NAME & SURNAME
SIGNATURE of Authorised Representative of Company

Note: All personal data provided on this form is protected by the provisions of the Data Protection Act and may be used for public administration purposes.