



Caribbean Customs Clearance Form Aruba

International vessels

INBOUND: OUTBOUND: ROTATION REF.NO:

Vessel Name: _____ Registration number: _____
 Owner Name: _____ Country of Registration: _____
 _____ Home Port Country: _____
 Owner Address _____ Home Port City _____
 _____ Call Sign: _____
 Reason for Visit _____ Hull ID: _____
 Contact Number _____ MMSI NM : _____

Arrival Date: _____ Intended departure date: _____
 Time Arrival: _____ Previous Country: _____
 Arrival Port: _____ Previous Port: _____
 Next Country: _____
 Next Port: _____

Type of Vessel: _____
 No.masts: _____
 Year Built: _____
 Constr. Material: _____
 Color: _____

Outboard motor.
 Brand : _____
 Qty : _____ HP _____

Inboard motor.
 Brand : _____
 Qty : _____ HP _____

Dimensions: feet meters:
 Length: _____ Width: _____
 Draft: _____ Gross tonnage: _____ Netto tonnage: _____

CREW AND PASSENGER LIST:

Family Name:	First Name:	M/C/P:	Birth date: DD/MM/YYYY	Passport #	Nationality:

Do you have weapons on Board? Yes No If yes provide details as follows:
 (Type (eg.pistol, rifle) Manufacturer Serial no: Caliber & City Ammunition

Do you have Stores and/or Livestock on board?

Spirits (L): _____ Monetary Instruments above \$10,000 USD: _____
 Wines (L): _____ Restricted Goods (including CITES): _____
 Cigarettes(#): _____ Animals: _____
 Cigars (#): _____ Other: _____
 Tobacco (grams): _____

I hereby declare that all information and particulars supplied on this form are true and correct.
 DD/ MM/YYYY

Signed: _____ (Master) Date: _____ Actual Departure Time _____

Date: _____ Officer Processing : _____