



Customs Clearance Form

Aruba

INBOUND OUTBOUND
(Check the appropriate box)

Name of Country

For

Vessel Name _____
Registration No. _____

Date of Arrival _____ (DD-MM-YYYY) Time of Arrival _____ (HH:MM)
Port of Arrival _____
Previous Port _____
Next Port _____

Type of Vessel _____
Home Port _____
Country of Reg. _____
Year Built _____
Gross Tonnage _____
Hull Material _____
No. of Masts _____
Colour _____

Rotation Ref. No. _____
Owner _____
Address _____
Contact Cellphone _____

Date of Departure _____ (DD-MM-YYYY)
Purpose of Visit _____
Country of Origin _____
Next Country _____
GPS No. _____

Length of Vessel	Feet/Meters	
Width of Vessel	Feet/Meters	
Qty. of Outboard Motor	HP	Brand
Qty. of Inboard Motor	HP	Brand
Fuel Type		
Fuel Tank Capacity		
Quantity of Fuel on Arrival		
Quantity of Fuel on Departure		

CREW AND PASSENGERS LIST

Please fill in the letter M, C or P in the column 'Position'. (M=Master/C=Crew/P=Passenger)

Family Name	First & Middle Names	Position	Place of Birth	Nationality	Passport No.	Date of Birth (DD-MM-YYYY)
1.						
2.						
3.						
4.						
5.						
6.						

Do you have any firearms on board? No Yes If yes, provide details below.

Firearm Type (e.g. Pistol, Rifle)	Brand	Serial No.	Caliber	Quantity Ammunition

I hereby declare that all the information provided on this form is true.

Signature (Master)

Date (DD-MM-YYYY)

FOR OFFICIAL USE ONLY

Remarks

Customs officer _____ Date _____