ANF-8 APPLICATION PROFORMA FOR REGISTRATION OF QUALITY COMPLAINTS AND TRADE DISPUTES

A. Applicant's details:

| i. | Name of the Complainant: | |
|-------|--|--|
| ii. | Name and Address of firm: | |
| iii. | IEC number, if applicable: | |
| iv. | Contact number (with area/ country code): | |
| ٧. | E-mail ID: | |
| vi. | Full name and IEC number of the firm against whom | |
| | complaint is made: | |
| vii | Address and contact number (with area/ country code) and | |
| | email ID of the firm against whom complaint is made: | |
| viii. | Whether the supplier is a merchant exporter or a | |
| | manufacturer exporter: | |
| 1 | | |

B. Particulars of Quality Complaint (Please fill in the necessary columns)*

| i. | Description of the item(s) imported/ exported | |
|-------|---|--|
| ii. | Total quantity & value of consignment | |
| iii. | Details of quantity/ quality and amount under dispute / claim | |
| iv. | Particulars of Contract/ L.C./ Export Order, if any, | |
| | giving details of technical requirements stipulated (attach copies) | |
| V. | Whether any sample was approved? (attach particulars) | |
| vi. | Date of arrival of goods at the destination port. | |
| vii. | Condition of the goods at destination point. | |
| viii. | Whether consignment was in sealed condition? | |
| | If so, give particulars of the seal used. | |
| ix. | Bill of Lading/ Shipping Bill/ Airways Bill Number (attach copies) | |
| X. | Whether exporter forwarded copy of inspection certificate(Please furnish copy) | |
| xi. | a) Whether any independent survey of the goods was done(Please furnish copy of every report) b) Whether survey was carried out with or without the consent of supplier? | |
| | | |

| xii. | Whether quality defects were also covered by insurance(for perishable | |
|------|---|--|
| | goods) | |

C. Particulars of Trade Dispute (Please fill in the necessary columns)*

| a. | Non- payment/ Partial | i. | Total amount of contract | |
|----|--------------------------------|-----------|--|--|
| | payment for the goods supplied | ii. | | |
| | | iii. | Due Date of the amount to be paid | |
| b. | Non-payment of Commission | i. | Export order/LC (copy may be furnished) | |
| | | ii. | Agency agreement (copy may be furnished) | |
| | | iii. | Export invoice (copy may be furnished) | |
| | | iv. | Amount & Due Date of Commission | |
| | | V. | Copies of correspondence exchanged (may be furnished) | |
| C. | Non- execution of Export Order | i. | Export order/LC (copy may be furnished) | |
| | | ii. | Whether any sample was approved? (if yes, give details & attach a copy of the report) | |
| | | iii. | Copies of correspondence exchanged | |
| | | iv. | Was anything pending from your end? | |
| | | V. | Reasons for delay/ non- execution, as far as known | |
| d. | Short Supplies | i. | Whether any agency was nominated for inspection prior to export? (If yes, furnish details & attach a copy of the report) | |
| | | ii. | Short landing survey certificate (copy may be furnished) | |
| | | iii. | Whether any survey was carried out at port of destination(please enclose copy) | |
| | | iv. | Packing list(please enclose copy) | |
| | | V. | Reason(s) for short landing, as far as known. | |
| | | vi. | Copies of correspondence exchanged | |
| e. | Any other complaint | | | |
| | (Give details and attach leg | gible cop | ies of the evidence) | |

D. General Information*:

| i) | Whether imports were effected from this supplier/ exporter in the past. | |
|-----|--|--|
| ii) | Complaint on past dealings with this trader (if any) and mode of their settlement. | |

| iii) | Whether further orders have been placed with the same trader subsequently. | |
|------|---|--|
| iv) | Any other relevant information that may be of assistance in investigation of the complaint. (attach legible copies of the evidence) | |

*Details, as applicable, are to be filled in.

DECLARATION/ UNDERTAKING

I hereby declare that the particulars and the statements made in this application are true and correct to the best of my knowledge and belief and nothing has been concealed or held there from.

| Place | | | | | | | | |
|--------|--|--|--|--|--|--|--|--|
| Date . | | | | | | | | |

Signature of the Applicant Name Firm's seal with address and name of firm