## MANSFIELD 🕖 AREA

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CHAMBER

**Return this form to:** Mansfield Area Chamber of Commerce 114 N. Main Mansfield TX 76063 lori@mansfieldchamber.org

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	eCO-Online REGISTRATION FORM
	Exporter Freight Forwarder (Please tick appropriate box)
Please complete	Organization:
	Address:
	City / State / Zip:
	Website:
	Taxpayer Identification Number:
"CHAMBER") from the above named	the American World Trade Chamber of Commerce and the Mansfield Area Chamber of Commerce (henceforth jointly referred to as the time to time granting Certificates of Origin and other export-related documents, or otherwise certifying documents upon request by Organization (henceforth referred to as the "Organization"), the Organization hereby accepts FULL responsibility for the veracity, oleteness of such documents as are submitted by the Organization (and/or its representatives), or by the Organization on behalf of any
	ilso affirms that the documents submitted for certification will not pertain to the export of controlled goods; if affirmative, that it (or its the necessary authorizations prior to submission to the "CHAMBER".
foreign authorities i	ration waives and agrees to release and hold harmless the CHAMBER and its officials in respect of all claims or expenses that the Organization or may have against the CHAMBER or its officials or agents, now or in the future, in connection with such certification, and to indemnify the ials and agents in respect of any costs or liability to the CHAMBER, its officials or agents arising from such certification.
CHAMBER is prese documents receive	acknowledges that the CHAMBER will keep copies of documents certified with the background documentation provided. If the ented with a demand for production of documents which is authorized by law, the Organization authorizes the CHAMBER to produce d from the Organization in accordance with the demand. The Organization also agrees to make readily available to the CHAMBER any documents (to be kept by the CHAMBER for at least three years after the certification), for review by relevant authorities if requested.
	<b>act / Authorized Official:</b> This is the exporter's primary contact for certification matters. For users of the online Origin system, this will be the primary system user who has authority to set up other users within the Organization.
Please complete	(Print / type full name of Primary Contact. Complete even if Primary Contact is same as Authorizing Official)
	Job Title:
	eMail Address:
	Direct Tel: Company Tel:
Applications for Certificates of Origin are accepted under the below terms of conditions and those listed at www.awtcc.org, which apply to each Application made, and you Agree to all terms and conditions:	
- The goods mentioned in each Application originate in the country(ies) specified therein and comply with the rules of origin applicable in the country(ies) to those goods.	
- The information in the Application and in all documents provided to the CHAMBER is accurate, true and complete.	

- The Applicant undertakes to advise the CHAMBER and any other person(s) to whom the applicant provides each Certificate (or to whom a Certificate is provided to with the knowledge of the Applicant) promptly in writing of any inaccuracy, omission or change in such information, or in the origin of the goods.

- The Applicant will maintain, and present upon request, such documentation as is necessary to verify the truth, accuracy and completeness of each Certificate and accompanying documents.

- In consideration for the CHAMBER's issuance of each Certificate, the Applicant agrees to release, discharge and hold harmless the CHAMBER from any liability in connection with the issuance of the Certificate, and to indemnify the CHAMBER in respect of any costs and/or claims made against the CHAMBER in connection thereof.

- The Authorized Official is authorized to give the undertakings set out herein and above.

Upon completion of your registration form, The Primary Contact will receive the login details and User Guide via email.

Print Name of Authorized Official

Print Title of Authorized Official

DATE

**CHAMBER** Forward signed form to: register@awtcc.org Member Nonmember

2020