

EDI PROFILE APPLICATION

To be completed by G7 EDI Export participants transmitting G7 export declarations to the CBSA.

Registered Name of Company: -----

Head Office Business Address: -----

City: -----

Province: -----

Postal Code: -----

Place of Transmission
(if different from above): -----

City: -----

Province: -----

Postal Code: -----

Primary Contact Person: Name: -----

Title: -----

Phone No: -----

Fax No.: -----

License No. -----

Authorization ID -----

In order to benefit from the direct transmission privileges extended to EDI users, the above agree to comply with the conditions/requirements briefly outlined in this document.

EDI Primary Contact Person:
(Name of individual responsible for EDI within Company)

Name: -----
Title -----
Phone Number: -----
Fax No.: -----
E-Mail Address: -----

Afterhours Contact Person:
(Name of individual responsible for
EDI within Company afterhours)

Name: -----
Title: -----
Phone Number: -----
Fax No.: -----

Mail Box ID:

Are you currently an EDI participant with CBSA? Yes No

Name of Software Provider:

Software Used:

PROCESSING INFORMATION

Message Standard and Network Option:

It is possible for clients to use VAN, Customs Internet Gateway or Direct Connect communication options?

EDI Communication Method:

Method of communication:

- Value Added Network (VAN)
- Customs Internet Gateway (CIG)
- Direct Connect

Name of VAN/CIG/Direct connect -----
Mailbox Name/ID -----
Certificate Number (CIG only) -----

Distribution of Documentation:

All documents can be found on CBSA's website at the following address:

<http://www.cbsa.gc.ca/eservices/menu-eng.html>.

Signed: ----- Title: -----

Date: -----