

ZIMBABWE CBCA PROGRAM REQUEST FOR USED VEHICLE INSPECTION FORM

Inspection details						
Vehicle inspection address:						
(Physical address where vehicle is avo	flable for inspection)					
Requested inspection date:						
Contact person:	Telephone number:					
	Importer/exporter details					
Name	Address					
Exporter:						
Importer:						
Applicant email address (for invoicing	g purposes):					
Invoice value:	Country where vehicle was last in use:					
Invoice number:	Vehicle country of origin/manufacture:					
Invoice date:						
Vehicle driver contact details (where	applicable):					
Paying party:	☐ Exporter ☐ Importer ☐ Other					
Payer details						
Name:	Address:					
Contact number (if any):						
Contact number (if any):						



Vehicles							
No	Vehicle Make	Vehicle Model	Chassis No/VIN	Mileage/Odometer (km)	Date of Manufacture	Tariff/HS Code of the Vehicle	
Declaration regarding used products to be exported to/imported into Zimbabwe							
Signatory of this document declares that the used vehicles listed (tick the appropriate box):							
☐ In the proforma invoice / packing list / invoice / letter of credit number:			invoice / letter of credit	Dated:			
□ Below:							
Cleaned and in good condition before export							
Functional (not broken, has no missing parts)							
Date:							
Name:							
Title:							

<u>Please attach the following Requirements:</u>

- Invoice & Tariff Code of the Vehicle
- Registration/De-Registration Documents
- Latest Roadworthiness Certificate (if available)
- Vehicles older than 10 years require an import license.

(For returning residents with vehicles older than 10 years please provide a returning resident declaration letter)

Date:

Client Signature: