

ZIMBABWE REVENUE AUTHORITY ASYCUDA Agents Profile Request Application Form

*please complete **all** fields: 1 to 15 Place" \boxtimes " in a box before the selected option

1.	□ NEW APP	LIC								1ENC	IDMENT DE-ACTIVATE				
	APPLICANT'S DETAILS														
2	Company Nan	ne													
3	BP Number														
4	Full Address														
5	Title		□ Mr	. [] N	Virs.		M	s.		(Other (specify)			
6	Surname	First names													
7	Contact Numb	Email Addre						ress							
8	Job Title	tle 🗆			Sup	ervisor]	Manag	ger		Accountant		Director	
10	Clearance Off	ice I	E.g. ZW	BB											
11	Function(s)		Declara	Declaration Processing – Electronic DTI							E-Manifest (Capturing)				
	I		List of Bill of Entry (Status)								List of Manifests				
		,, ,								Viewing of Transit Guarantee					
		Viewing of Pre-payment Account								Α	ccount				
12	VALIDITY	FROM									ТО				
12	PERIOD		D D	/ \	/ N	Л / Y	Υ	Υ	Y	D		D / M M /	Y	YYY	
13	Applicant's Signature Date:														
	Applicant's Manager Approval											COMP	A NIX/		
14	Manager's Full r	2									OFFICE :		P		
15	Signature	Date:								_					
		, <u></u>									\				
						R OFFICA				RA				-	
16	COMPLIANCE] R	RECOMI	MEN	NDI	ED		N	NOT RECOMME	NDE	.D	
	Officer's Name			Signature						Date:					
17	ASYCUDA FUN	ICT	IONAL		_ <i>f</i>	APPROV	/ED)			ſ	NOT APPROVE)		
	Officer's Name Sig						nat	:ure				Date:			
18	Profile Status	ACTIVATED							D		☐ DE-/	ACTIV	ATED		
												ZIM	RA		
	Name of Officer:	Signature								OFFICE	STAN	IP			
	For ASYCUDA Function	onal I	Vlanager												

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