



Carribbean Customs clearance form

Aruba

NAME OF COUNTRY

(√)Tick the appropriate box

FOR

CLEARANCE ARRIVAL CLEARANCE DEPARTURE

ROTATION REF.NO:

NAME OF YACHT:		REGISTER # :	
OWNER:		ADDRESS:	

DATE OF ARRIVAL:	DD/ MM/ YYYY	ARRIVAL TIME:	HOUR	DATE OF DEPARTURE	DD/ MM/ YYYY
ARRIVAL PORT				PURPOSE OF VISIT:	
LAST PORT				COUNTRY OF ORIGIN	
NEXT PORT				NEXT COUNTRY	
CONTACT CELLULAR:				GPS No.	

TYPE OF SHIP:			NUMBER OF MASTS	YEAR OF CONSTRUCTION
HULL MATERIAL			GROSS TONNAGE	COLOR:
HOME PORT			PLACE OF REG	
LENGTH OF THE SHIP:		FEET/METERS	WIDTH	FEET/METERS
OUTBOARD MOTOR:	NUMBER	BRAND:		HP:
INBOARD MOTOR:	NUMBER	BRAND:		HP:
FUEL	TYPE	QUANTITY	DEPARTURE:	
TANKCAPACITY			ARRIVAL:	

CREW & PASSENGER LIST

NAAM	VOORNAMEN	Master [M]	Nationality	Passport	Date of birth
		Crew [C]	Place of birth		dd/ mm/ yyyy
		Passenger [P]			/ /
1.					/ /
2.					/ /
3.					/ /
4.					/ /
5.					/ /
6.					/ /

DO YOU HAVE FIRE WEAPON ON BOARD:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	IF YES, DECLARE AS FOLLOW:	
Type (e)	BRAND:	Serial No.	Calibre/ammunation	

I certify dat the above mentioned informations are truthful

Signature (Master) _____ Date:

dd/ mm/ yyyy
/ /

FOR OFFICIAL USE ONLY

Remarks _____

Date _____ Customs _____