

**GOVERNMENT OF GUAM**

Customs and Quarantine Agency, 770 East Sunset Boulevard, Ste. 240  
 Tiyan Guam 96913  
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**VESSEL DEPARTURE CLEARANCE REQUEST FORM**

Form CQ067, Approved, Rev. 12/09/11

**Purpose: This form is to provide information to the Agency in order to prepare and grant a CQA "CLEARANCE OF VESSEL" to the requestor prior to departure.**

**GENERAL INFORMATION**

1. Company Name:	2. E.I.N.:	3. Mailing Address:
4. Agent / Requestor:	5. Signature:	6. Contact Nos.:

**To the Officer-in-Charge of the Customs and Quarantine Agency, Maritime Section:**

Please be advised that the \_\_\_\_\_,  
 (Vessel Name) (Voyage No.)

is due to depart Guam on \_\_\_\_\_, at \_\_\_\_\_ hours.  
 (Date of Departure) (ETD)

This voyage is bound for \_\_\_\_\_,  
 (Destination)

and a Guam Customs & Quarantine Agency official vessel departure clearance is hereby requested.

**VOYAGE INFORMATION**

Name of Master:	
Total Number of Crew:	
Gross Registered Tonnage:	
Registered at:	
Commercial Cargo Load:	
Military Cargo Load:	
Number of Passengers:	
Built of:	

**RECEIVING INFORMATION (FOR CUSTOMS USE ONLY)**

7. Customs Officer Name & Badge No.:	8. Customs Officer Signature:	9. Date Received:	10. Time Received:

Maritime Office tel (671) 475-6215 fax (671) 472-1188  
 Airport Office tel (671) 642-8071/2 fax (671) 649-1755

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