

**CHECKLIST OF REQUIREMENTS**

**Duty-Exempt Importation of Foreign Donated Goods**

Under Section 800(m) of the Customs Modernization and Tariff Act  
*(Licensed and/or Accredited SWDA)*

**Name of Applicant** : \_\_\_\_\_  
**Address** : \_\_\_\_\_  
**DSWD License No and Expiration Date** : \_\_\_\_\_  
**DSWD Accreditation No and Expiration Date** : \_\_\_\_\_  
**Region/ Field Office** : \_\_\_\_\_

Put a check ( ✓ ) in the corresponding box if the document is available or (X) mark if not.

Available	Documentary Requirements		Remarks
	1	Pre-assessment/endorsement of DSWD Field Office concerned	
	2	Duly accomplished Application Form signed by the Agency Head or his/her authorized representative  <i>DSWD-DFE Form 1, S800(m), MCTA</i>	
	3	Authenticated Deed of Donation from the Philippine Consular Office of the country of origin, with accompanying certificate as to fitness of food and medicine for consumption and compliance with the country of origin's sanitary and phyto sanitary standards.	
	4	A separate Notarized Deed of Acceptance	
	5	Shipping documents such as original and/or duly certified true copy of Bill of Lading or Airway Bill;	
	6	Original and/or duly certified true copy of Packing List	

Available	Documentary Requirements		Remarks
	7	Duly approved Plan of Distribution <i>DSWD-DFE Form 2, Annex B</i>	
	8	In case of medicines, a Certification from the Food and Drug Administration (FDA) of the Philippines that the commodities are allowed for free distribution and use by the intended beneficiaries without the need of a prior prescription and that these are safe for human consumption.	
	9	Photocopy of Official Receipt signifying the payment of the processing fee at the DSWD Field Office.	
	10	If applicable, notarized distribution report on the latest shipment previously received by the applicant <i>DSWD- DFE-Form 3, Annex C</i>	
	11	In case of relief items other than food and medicines, proof of prior agreements or approved arrangements with appropriate government agencies.	
<b><i>Other documents submitted by the applicant:</i></b>			

**Remarks:**     For endorsement     For submission of lacking documents

Reviewed by: \_\_\_\_\_

\_\_\_\_\_  
*Name and signature of staff*

\_\_\_\_\_  
*Date*