



CBP Form 3311 Instruction

CBP Form 3311 - Declaration For Free Entry of Returned American Products, is a required form that must accompany all international Return/Repair shipments. This document highlights all fields that must be completed and provides guidance on filling out the document successfully. The *italicized* data is the exact information that should be populated on the form. Non-italicized data is specific to the individual customer or person completing the form.

Please contact your National Flight Sales representative or Shipping Department if you have any questions.

1. **Port** – Leave Blank
2. **Date** - Current Date
3. Entry No. & Date - Leave Blank (not to be filled in)
4. **Name of Manufacturer** – *Honeywell Aerospace**
5. **City and State of Manufacture** – 1944 E. Sky Harbor Circle, Phoenix, Arizona 85034*
6. **Reason For Return** - Should contain the following:
Equipment is being returned temporarily for repair and have no customs value, Made in the U.S., not advanced in value or improved condition. U.S. HTS#: 9801.00.1012
7. **U.S. Drawback Previously** – *Unclaimed*
8. **Previously Imported Under HTSUS 9813.00.05?** – *No*
9. **Marks, Numbers, and Description of Articles Returned** - As stated, needs to be filled in
10. **Value*** - As stated, needs to be filled in
11. *WAS and HAS boxes should be checked*
12. **Name of Declarant** - Person completing the form
13. **Title of Declarant** - As stated, needs to be filled in
14. **Name of Corporation** - As stated, needs to be filled in
15. **Signature** - As stated, needs to be signed
16. **Signature of Authorizing CBP Officer** - Leave Blank (not to be filled in)

*Please check the data plate of the part you are sending in. In the example, Honeywell Aerospace is used as they are the manufacture of all TPE331 engines.

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection
**DECLARATION FOR FREE ENTRY
OF RETURNED AMERICAN PRODUCTS**

19 CFR 7.8, 10.1, 10.5, 10.66, 10.67, 12.41, 123.4, 143.23, 145.35

Form Approved
OMB No. 1651-0011
Exp. 03-31-2016

1. PORT	2. DATE	3. ENTRY NO. & DATE
4. NAME OF MANUFACTURER Honeywell Aerospace		5. CITY AND STATE OF MANUFACTURE Phoenix, Arizona
6. REASON FOR RETURN The goods are of U&S Origin, being returned for repair.		7. U.S. DRAWBACK PREVIOUSLY <input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> UNCLAIMED
		8. PREVIOUSLY IMPORTED UNDER HTSUS 9813.00.05? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
9. MARKS, NUMBERS, AND DESCRIPTION OF ARTICLES RETURNED TPE331-5-252C P/N 3103860-1 S/N P-22300 Turbopropeller Engine		10. VALUE* Value Must be Provided

SAMPLE

* If the value of the article is \$10,000 or more and the articles are not clearly marked with the name and address of U.S. manufacturer, please attach copies of any documentation or other evidence that you have that will support or substantiate your claim for duty free status as American Goods Returned.

11. I declare that the information given above is true and correct to the best of my knowledge and belief; that the articles described above are the growth, production, and manufacture of the United States and are returned without having been advanced in value or improved in condition by any process of manufacture or other means; that no drawback bounty, or allowance have been paid or admitted thereon, or on any part thereof; and that if any notice(s) of exportation of articles with benefit of drawback was were filed upon exportation of the merchandise from the United States, such notice(s) has have been abandoned.

12. NAME OF DECLARANT Joe Green	13. TITLE OF DECLARANT Manager
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14. NAME OF CORPORATION OR PARTNERSHIP (If any) ABC Corporation	15. SIGNATURE (See note)
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16. SIGNATURE OF AUTHORIZING CBP OFFICER

NOTE: If the owner or ultimate consignee is a corporation, this form must be signed by the president, vice president, secretary, or treasurer of the corporation, or by any employee or agent of the corporation who holds a power of attorney and a certificate by the corporation that such employee or agent has or will have knowledge of the pertinent facts.

PAPERWORK REDUCTION ACT STATEMENT: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0011. The estimated average time to complete this application is 6 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.