

ORIGINAL

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|---|---------------------------|--|--|----------------------|---|---------------------------------------|
| 1. Exporter's name and address: 2. Producer's name and address: 3. Consignee's name and address: 4. Means of transport and route Departure Date: Vessel/Flight/Train/Vehicle No.: Port of loading: Port of discharge: | | | Certificate No.: <p align="center">CERTIFICATE OF ORIGIN</p> <p align="center">Form for the Special Preference Treatment (Combination of Declaration and Certificate of Origin)</p> Issued in _____ (see Overleaf Instruction) | | | |
| 5. Remarks: | | | | | | |
| 6. Item number | 7. Marks and packages NO. | 8. Number and kind of packages; description of goods | 9. HS code (Six-digit code) | 10. Origin criterion | 11. Net weight, quantity (Quantity Unit) or other measures (liters,m ³ ,etc.) | 12. Number, date and value of invoice |
| 13. Declaration by the Exporter: The undersigned hereby declares that the above details and statements are correct, that all the goods were produced in _____ (country) and that they comply with the origin requirements specified in the Special Preference Treatment for the goods exported to China. ----- Place and date, signature of authorized signatory | | | 14. Certification: On the basis of control carried out, it is hereby certified that the declaration the exporter made is authentic. ----- Place and date, stamp of authorized body | | 15. Verification of Customs or Port Competent Department: It is certified that the goods declaring export are the same as described on the Certificate. ----- Place and date, stamp or signature of the Customs or Port Competent Department of export country | |

Overleaf Instruction

Certificate No.: Serial number of Certificate of Origin assigned by the authorized issuing body.

Box 1: State the full legal name and address (including country) of the exporter in a beneficiary country.

Box 2: State the full legal name and address (including country) of the producer in a beneficiary country. If goods from more than one producer are included in the certificate, list the additional producers, including their full legal name and address (including country). If the exporter or the producer wishes to maintain this information as confidential, it is acceptable to state "AVAILABLE UPON REQUEST." If the producer and the exporter are the same, please complete field with "SAME."

Box 3: State the full legal name and address of the consignee in the customs territory of China.

Box 4: Complete the means of transport and route and specify the departure date, transport vehicle No., port of loading, and port of discharge.

Box 5: State the order number, number of LC or other information.

Box 6: State the item number, 50 is the maximum.

Box 7: State the shipping marks and numbers on packages.

Box 8: The name of goods and the number and kind of packages shall be specified. If the goods are not packed, state "IN BULK". In the end of the description of goods, add '***' or '\ '.

Box 9: Identify the HS tariff classification to six-digit corresponding to the goods.

Box 10: If the goods satisfy the requirement of the Rules of Origin, the exporter shall indicate in Box 10 the origin criteria on the basis of which he claims that his goods qualify for the Special Preference Treatment, in the manner shown in the following table:

| origin criteria | to be filled in box 10 |
|--|--------------------------------|
| The goods are wholly obtained or produced in the territory of the beneficiary country as set out and defined in Article 4. | WO |
| The goods are produced used entirely by the originating materials in the territory of the beneficiary country. | WP |
| When the goods are subject to RVC criteria, RVC40% or CTH. | CTH or RVC40% |
| When the goods are subject to a requirement stipulated in PSR, the specified criteria shall be indicated. | Criterion as specified in PSR. |

Box 11: Net weight shall be shown in kilograms here. Quantity shall be shown in quantity unit. Volume may be filled in the unit of liters or m³.

Box 12: Invoice number, date of invoices and invoiced value shall be shown here.

Box 13: The field shall be completed, signed and dated by the exporter of the beneficiary country.

Box 14: The field shall be completed with place, issuing date and stamped by the officer of the issuing body.

Box 15: The field shall be completed with place, issuing date by the officer of the customs or port competent authority in the beneficiary country. Meanwhile, the field shall be stamped or signed by the officers said above.

In case where there is not enough space on the first page of a Certificate of Origin for multiple lines of goods, additional pages can be used. The Certificate number will be the same as that shown on the first page. Box 6 to box 15 shall be presented in the additional pages, together with the stamp of issuing body and the stamp or signature of the customs or the port competent authority.