

**FEDERAL REPUBLIC OF NIGERIA
NIGERIA EXPORT PROCEEDS FORM (NXP)**

ORIGINAL

BANK CODE	YEAR	BRANCH CODE	SERIAL NO.

1. Exporter's Name and Address: (P.O.Box Not Acceptable)	RC. No
	NEPC Reg. No.
2. Consignee's Name and Address:	3. BY ORDER OF: (if different from 2)
Country Code: _____	

4. Description of Goods: _____

Total Quantity: _____ No. of items expected (as per H.S. Codes): _____

ITEM NO. 1 H.S. Code: _____ Sectoral Purpose Code: _____ Unit Price: _____ Quantity: _____ Unit of Measure: _____ (kilogram) Net Weight/Mass: _____ (i.e. without packaging) Gross Weight/Mass: _____ (i.e. without packaging) Mode of Packaging: _____ FOB Value: _____ Freight Charges: _____	ITEM NO. 2 H.S. Code: _____ Sectoral Purpose Code: _____ Unit Price: _____ Quantity: _____ Unit of Measure: _____ (kilogram) Net Weight/Mass: _____ (i.e. without packaging) Gross Weight/Mass: _____ (i.e. with packaging) Mode of Packaging: _____ FOB Value: _____ Freight Charges: _____	ITEM NO. 3 H.S. Code: _____ Sectoral Purpose Code: _____ Unit Price: _____ Quantity: _____ Unit of Measure: _____ (kilogram) Net Weight/Mass: _____ (i.e. without packaging) Gross Weight/Mass: _____ (i.e. with packaging) Mode of Packaging: _____ FOB Value: _____ Freight Charges: _____
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Total Net Weight/mass (i.e. without packaging): _____ (e.g kilograms) Total Gross Weight/Mass: _____ (e.g kilograms)

TOTAL VALUE OF GOODS (in Foreign Currency):
 Total Value FOB: _____ Total Freight Charges: _____
 Total C & F Value: _____

5. Method of Payment: _____ Code: _____
 i.e. Letter of Credit, Bill for Collection, Pre-Payment, Others (please specify)

I/We: _____ certify that the foreign currency received will be deposited in my/our Export Proceeds Domiciliary Account in Nigeria within 3 months after shipment in accordance with the approved guidelines.
 Due date of payment: _____ Signature/Date: _____

6. Details of Collecting/Negotiating Bank in Nigeria
 Name of Bank and Address: _____
 Stamp and Signature of Authorised Officer: _____

7. Shipment
 Date: _____ Expected Port of Shipment: _____ Code: _____
 Port of destination/discharge: _____

CERTIFICATION

ITEM NO. 1 H.S. Code: _____ Unit Price: _____ Quantity: _____ FOB Value: _____ Freight Charges: _____	ITEM NO. 2 H.S. Code: _____ Unit Price: _____ Quantity: _____ FOB Value: _____ Freight Charges: _____	ITEM NO. 3 H.S. Code: _____ Unit Price: _____ Quantity: _____ FOB Value: _____ Freight Charges: _____
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TOTAL VALUE OF GOODS (in foreign currency)
 Total Value FOB: _____ Total Freight Charges: _____
 Total C & F Value: _____ Total Quantity: _____
 Signature: _____ Stamp: _____

(b) Nigeria Customs Service:
 Total Quantity: _____ Total Value: _____
 Date of Shipment: _____ SGD Form No. and Date: _____
 Bill of Lading and Date: _____ Manifest No. And Date: _____

Name of Certifying Officer _____ Signature of Certifying Officer/Date _____

Customs Endorsement, Stamp and Date

9. CERTIFICATION BY AUTHORISED DEALER IN NIGERIA IN RESPECT OF PROCEEDS OF SHIPMENT

Amount and Designation of Foreign Currency Received: _____	Amount: _____ Credited to Domiciliary Account of Exporter
	Dom. Account No: _____

We confirm that the amount of Foreign Currency specified above was received by us on: _____ Date _____

Name of Authorised Officer _____

Signature _____

Authorised Dealer's Stamp _____