



**Australian Government**  
**Australian Customs Service**

**ICS EFT client authorisation**

Refer to the *Preparing for CMR imports* booklet for assistance with completing this form.  
This form gives authorisation to the selected brokerage to quote their clients nominated bank account details.

**TIME SAVER** If this form was completed by a business with fewer than 20 employees, please provide an estimate of the time taken to complete this form.

Hours  Minutes

**Official use only (Branch ID)**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Importer / owner**

Given name and surname or company name:	ABN or Customs client ID (CCID):
<input type="text"/>	<input type="text"/>

**Details of the account to be debited (all account details must be supplied)**

BSB:	Bank account number:
<input type="text"/>	<input type="text"/>
Bank account name:	
<input type="text"/>	

**Daily account limit (this field will be treated as 'unlimited' if no limit is provided)**

Daily account limit:	Usage period start date:	Usage period end date:
\$ <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
To restrict the authorised daily account limit to a branch within the brokerage please provide the unique branch name below. If a branch is not included the daily account limit will be set at the ABN or CCID level of the brokerage.		
Unique branch name (from Establishment of branches form)		
<input type="text"/>		

**Licensed brokerage details**

Given name and surname or company name:	Brokerage's Customs client ID (CCID) or ABN:	
<input type="text"/>	<input type="text"/>	
Licensed brokerage contact name:	Contact phone (business):	Email:
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Client authorisation**

I provide the above with authorisation to quote these bank account details on import documentation for payment of charges to Customs.

Client given name:	Surname:	Phone number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Client signature(s) (all signatories may be required to sign on joint accounts):		Date:
<input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>

**Note:**

- Where a client has more than one bank account a separate ICS EFT client authorisation form must be completed.
- It is mandatory that clients have only one default bank account. If this is your default account tick this box:

Note: Only original ICS EFT client authorisation forms will be accepted (no photocopies).  
EFT registration can take up to 5 working days. To check if it has been processed, please access the ICS and search under the 'Client Summary View' screen, selecting first the 'Bank Accounts' hyperlink and then the 'BSB Number' hyperlink. If it has not been actioned within 5 working days, please ring 1300 558 099 for assistance.

Please send completed form to:  
Attention: User Support, Cargo Systems  
Australian Customs Service  
Customs House  
5 Constitution Avenue  
Canberra City ACT 2601