

## DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

OMB Approval No: 1651-0078 Expiration Date: 01/31/2021 Estimated Burden: 5 Min.

## **ACH CREDIT APPLICATION**

19 CFR 24.26

(This form will be used to m	aintain point of contact infor	mation)	
Please type or print inform	nation		
Mark one:	Change of Information		
Date:			
Payer Company Name:			
Payer Company Address:			
Payer City, State, Zip:			
Payer Contact Name(s):			
Payer Email Address:			
Payer Phone Number(s):	Fax:		
Payer Importer Number:		Filer Code:	
	(Importer, Social Security of CBP Assigned Number)	or	(3 Character Broker ID)
Name of Company Official		Signature of Company Official	
·	orm should be faxed or mail		000
U.S. Customs and Border F Revenue Division ACH Credit Applications 6650 Telecom Drive, Suite Indianapolis, IN 46278	FAX: E-mail:	ne: (317) 298-1200 Ext. 1 (317) 298-1259 <u>ACH-Customs@cbp.c</u>	
U.S. Customs and Border P	non-dollar amount (\$0), with Protection (CBP) of the date sign an effective date to beg	of the prenote. Once prer	ote transaction has been
TO BE CO	MPLETED BY U.S. CUST	OMS AND BORDER	PROTECTION
Effective Date:	The effective date is the	first date that the ACH Cred	it Payment may be originated.
Name of CBP Official		Signature of CBP Official	

CBP Form 401 (7/18) Page 1of 2

## **Privacy Act Statement**

**AUTHORITY:** CBP is authorized to collect the information requested on this form pursuant to 19 CFR §§ 24.25 and 24.26; and to collect Social Security numbers (SSN) under Executive Order (E.O.) 9397, as amended by E.O. 13478.

**PURPOSE:** CBP is requesting this information to allow the importer of record to make electronic payments for import related duties, taxes, fees, and interest, deferred tax payments, or bill payments, etc., through the Automated Clearinghouse (ACH) debit or credit process. ACH debit allows the filer to voluntarily select to authorize the Treasury-designated ACH processor to electronically debit the payer's bank account; ACH credit is an optional payment method that allows the payer to transmit statement processing payments through its financial institution, directly to the CBP account maintained by the Department of the Treasury.

**ROUTINE USES:** Consistent with DHS's information-sharing mission, the information requested on this form may be shared with other DHS Components to carry out national security, law enforcement, immigration, trade, or other homeland security functions. Information may also be shared with appropriate federal, state, local, tribal, territorial, foreign, or international government agencies. This sharing will assist DHS in exercising control over the customs financial transactions of import-related duties, taxes, fees, and interest associated with the movement of merchandise through international commerce. A complete list of the routine uses can be found in the system of records notice associated with this form, "DHS/CBP-001 Import Information System (IIS)." The Department's full list of system of records notices can be found on the Department's website at: http://www.dhs.gov/system-records-notices-sorns.

**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information to is voluntary. However, failure to provide this information may result in the inability for an importer to participate in ACH Debit or Credit payment programs to pay Duties taxes and Fees related to entry. An alternative for not participating in ACH is to have the importer work as a Non-ACE Portal Account holder and make all payments due through a broker, who is an ACE Portal Account holder. Brokers are able to place eligible entry summaries for activated non-portal accounts on a broker or importer statement. For further details, please see the Federal Register Notice (FRN), 70 FR 61466, published on October 24, 2005, announcing the establishment of non-portal accounts, as well as any other applicable FRNs, at the following link: <a href="https://www.cbp.gov/trade/priority-issues/revenue/revenue-modernization">https://www.cbp.gov/trade/priority-issues/revenue/revenue-modernization</a>.

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 1651-0078. The estimated average time to complete this application is 5 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, 90 K Street, NE., Washington DC 20229.

CBP Form 401 (7/18) Page 2 of 2