



ANTIDUMPING (AD)/COUNTERVAILING (CV) QUESTIONNAIRE

Importer Name _____

Importer Number _____

Please answer the below to the best of your knowledge

1. What is the description of the merchandise being imported that is subject to AD/CV duties?

2. What country is this merchandise from?

3. What is the AD/CV case number?

4. What amount (entered value) of merchandise imported in the last year (last 12 months) was subject to ADD/CVD?

5. What amount (entered value) of merchandise subject to ADD/CVD is expected to be imported in the next year?

6. What is the ADD/CVD rate?

7. If a specific manufacturer/exporter's rate is being used, what is the name of the manufacturer/exporter?

8. Are you filing a non-reimbursement statement filled out by the importer? If so, please provide a copy of the non-reimbursement statement.

Please forward this completed questionnaire to:

AVALON RISK MANAGEMENT
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