

Haiti HOPE II Visa Application

1. Haiti Manufacturer Name and Address	3. U.S. Importer Name and Address			
2. MID Code	4. Quantity of Goods in Dozens			
5. Description of Goods (may include PO or style number)		6. Category		
7. Direct Shipment from Haiti <input type="checkbox"/> These goods will be shipped directly from Haiti to the United States				
8. Direct Shipment from the Dominican Republic <input type="checkbox"/> These goods will be shipped directly from the Dominican Republic to the U.S. and may be subject to the following operations: <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> washing <input type="checkbox"/> enzyme washing <input type="checkbox"/> drying <input type="checkbox"/> folding <input type="checkbox"/> packing <input type="checkbox"/> other: _____ </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> tagging <input type="checkbox"/> storage <input type="checkbox"/> consolidation <input type="checkbox"/> finishing <input type="checkbox"/> screenprinting </td> </tr> </table>			<input type="checkbox"/> washing <input type="checkbox"/> enzyme washing <input type="checkbox"/> drying <input type="checkbox"/> folding <input type="checkbox"/> packing <input type="checkbox"/> other: _____	<input type="checkbox"/> tagging <input type="checkbox"/> storage <input type="checkbox"/> consolidation <input type="checkbox"/> finishing <input type="checkbox"/> screenprinting
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9. Dominican Republic Company Name and Address				
I certify that these garments were wholly assembled or knit to shape in Haiti and that the information in this document is accurate. A true copy of the commercial invoice for these goods is attached hereto. I agree to maintain, and present upon request, documentation necessary to support this application.				
10. Authorized Signature	11. Company			
12. Printed Name	13. Title			
14. Telephone Number	15. Date			