



Australian Government
**Department of Immigration
and Border Protection**

**Intellectual Property and
Commerce Labelling
Referral Details**

Details Supplied By

Name*

Company Name

Address*

Postal Address

Telephone Number*

Fax Number

Email

Suspect Details

Name

Gender

Company Name*

Company ABN

Address*

Postal Address

Telephone Number

Importation Details

Types of Goods*

Method of Importation

Country of Origin

Port of Arrival

Estimated date of Arrival

Supplier Name/Company

Once completed please return completed form to submit via e-mail above.

* denotes mandatory field

B253 (July 2015)

Background Details

Once completed please return completed form to submit via e-mail above.

* denotes mandatory field

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