

U.S. INTERNATIONAL TRADE COMMISSION

MTB Process: Information for Petitions

1. Enter the 8-digit HTS number for the product.
2. Are you requesting a temporary duty suspension or a temporary duty reduction?
(Suspension/Reduction) If “reduction,” what is the lower duty rate that you are requesting?
3. Is there an expired provision in Chapter 99 of the HTS that covers the product?
(Yes/No/Do Not Know) If “yes,” enter the 8-digit HTS number from chapter 99 that covers the product.
4. Petitioner information
 - a. Name of petitioner
 - b. Address
 - c. Contact information (person within your company to contact about this petition)
 - i. Name (individual) and title
 - ii. Phone number
 - iii. Email address
 - d. I certify that the petitioner is a likely beneficiary of the request, if granted? (Yes/No)
5. Are you an independent representative of the petitioner? (Yes/No/NA) If “yes,”
 - a. Name (individual)
 - b. Firm/Organization
 - c. Phone number
 - d. Email address
6. Information required for a new temporary duty suspension/reduction
 - a. Provide the information indicated below in the format shown in the example below.
 - i. The article description for the proposed duty suspension or reduction to be included in the amendment to subchapter II of chapter 99 of the HTS
 - ii. Is the product a chemical? (Yes/No) If “yes,” provide:
 - (1) CAS number
 - (2) IUPAC/systematic name
 - (3) Colour Index number, if applicable
 - (4) International Nonproprietary Name (INN), if applicable
 - iii. The 8-digit HTS number, as provided in question 1.
 - iv. The requested duty rate, as provided in question 2. If suspension the requested duty rate is “Free”

Format for 6(a) – The Commission will complete the material to be inserted in the other columns of the HTS (as shown in the sample below), but the petitioner must provide the information (where applicable) that is highlighted in yellow below.

| | | | | | | | |
|---|------------|--|------|-----------|-----------|-------------------------|----|
| “ | 9902.06.02 | 2-Imidazolidinone, 1-(2-aminoethyl)-, reaction product with oxirane, ((2-propenyloxy)methyl)- (CAS No. 90412-00-3) (provided for in subheading 2933.29.90) | Free | No change | No change | On or before 12/31/2007 | ”. |
|---|------------|--|------|-----------|-----------|-------------------------|----|

- b. Does the article description from part 6a above, include more than one HTS number from chapters 1–97? (Yes/No) If “yes,” list the HTS numbers other than the one you entered above.
 - c. Is there a published Customs ruling establishing the HTS classification of your product? (Yes/No) If “yes,” provide the ruling.
 - d. Has your firm previously imported the product? (Yes/No) If “yes,” provide a copy of a liquidated CBP entry summary supporting the product’s classification for each HTS subheading you indicate above.
7. Description of the imported product and how it is used.
- a. Provide a brief description of the product.
 - b. Provide a brief description of how the product is used.
 - c. Is the product an intermediate product (i.e., is it used to make another product)?
 - d. Provide a description of the industry that uses or processes the product

8. U.S. imports

- a. From what country or countries is the product imported?
- b. Provide estimates of U.S. import data for the product for full 2015 and 2016 and for the next 5 years. If additional HTS numbers were entered in 6b, fill out a separate table for each HTS number.

| Past imports | | Estimates of future imports | | | | |
|------------------------------|--------------------------|-----------------------------|------|------|------|------|
| 2015 | Estimated full year 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
| Total U.S. imports | | | | | | |
| Dutiable U.S. imports | | | | | | |

- c. Are you aware of any other U.S. importers of the product? (Yes/No) If “yes,” provide contact information (firm name, contact name, phone, email) for other importers.
- d. Are you aware of any beneficiaries other than the petitioner and U.S. importers listed above? (Yes/No) If “yes,” provide contact information (firm name, contact name, phone, email) for other beneficiaries.
- e. Are you aware of any antidumping or countervailing duty orders or other additional duties (e.g., Section 201 or 301) on the product? (AD/CVD/other). If “other,” describe the additional duties.

9. U.S. industry and product information

- a. Is the product made in the United States? (Yes/No/Production planned to begin in next 3 years/Do not know)
- b. Is there a like or directly competitive product made in the United States? (Yes/No/Do not know) If “yes,” provide a description of the like or directly competitive product.
- c. If the product is produced in the United States, is it commercially available? (Yes/No/Do not know/not applicable) If “no,” provide an explanation.
- d. If you answered “yes” or “planned production” for any of the above questions, provide a list of the domestic producers and their locations.
- e. If you answered planned production to begin in next 3 years, please provide information as to when the production is expected to begin.

10. I certify that the proposed duty suspension or reduction is available to any person importing the article, to the best of my knowledge. (Yes/No) If “no,” explain any legal provision, such as a patent or license that would make it unavailable to any other person or available only to licensees.