

OCEANAIR, Inc.

Headquarters

5 Centennial Drive, Suite 400 Peabody, MA 01960 TEL: 781.286.2700 FAX: 781.286.3095 WEB: oceanair.net

United States – Mexico – Canada Agreement – USMCA

CERTIFICATION OF ORIGIN

1a. BLANKET PERIOD (dd/mm/yyyy)			1b. SINGLE SHIPMENT YES					
FROM: To:			Invoice Number:					
2. CERTIFIER'S NAME AND ADDRESS TELEPHONE:				3. PRODUCER'S NAME AND ADDRESS TELEPHONE:				
EMAIL ADDRESS:			EMAIL ADDRESS:					
TAX ID NO.:			TAX ID NO.:					
Certifying Party:		Importer Producer						
4. EXPORTER'S	NAME AND ADDRE	:SS	5. IMPORTER'S NAME AND ADDRESS					
TELEPHONE:			TELEPHONE:					
EMAIL ADDRESS:			EMAIL ADDRESS:					
TAX ID NO.:			TAX ID NO.:					
6a. PART NUMBER	I	6b. DESCRIPTION OF GOOD(S)	CRIPTION OF GOOD(S) 7. H CLASS		8a. ORIGIN CRITERION	8b. COUNTRY OF ORIGIN		
9. CERTIFICATION								
I certify that the goods described in this document qualify as originating and the information contained in this document is true and accurate. I assume responsibility for providing such representations and agree to maintain and present upon request or to make available during a verification visit, documentation necessary to support this certification. This Certification consists of pages, including all attachments								
AUTHORIZED SI	GNATURE:		COMPANY					
NAME			TITLE					
DATE (dd/mm/yyyy)		EMAIL			TELEPHONE			

Form No. OAUSMCACOO Updated: April 2024



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CERTIFICATION OF ORIGIN INSTRUCTIONS

For purposes of obtaining preferential tariff treatment at the time of entry, this document must be completed legibly and in full, and be in the possession of the Importer at the time the declaration is made. This document may be completed by the Producer, Exporter and/or Importer.

- Field 1a: For multiple shipments of identical goods for a specified period of up to 12 months as set out in Article 5.2 (Claims for Preferential Treatment), provide the date upon which the certification becomes applicable in the FROM field and the date in which the blanket period expires in the TO field. Please note the FROM date may be prior to the date of signing this certification. Any information provided should be updated In the event any previously-issued certification no longer applies. Complete this field only if applicable.
- **Field 1b:** If the certification is only applicable to a single shipment, check the YES box to the right of Single Shipment and provide the Invoice Number applicable to the single shipment. Complete this field only if applicable.
- Field 2: Provide the Certifier's name, title, address (including country), email address, and telephone number. Indicate whether the Certifier is the Exporter, Importer, or Producer in accordance with Article 5.2 (Claims for Preferential Treatment) of the Agreement.
- Field 3: Provide the Producer's name, address (including country), email address, and telephone number. If there are multiple Producers, state "Various" or provide a list of producers. The address of a Producer shall be the place of production of the good in a Party's territory. If the Certifier wishes for this information to remain confidential, please state "Available upon request by the importing authorities".
- Field 4: Provide, if known, the Exporter's name, address (including country), email address, and telephone number. The address of the Exporter shall be the place of export of the good in a Party's territory.
- Field 5: Provide, if known, the importer's name, address (including country), email address, and telephone number. The address of the Importer shall be in a Party's territory. If there are multiple importers, state "Various".
- Field 6: Provide a full description of each good subject to the certification. The description should be sufficient to relate it to the invoice description and to the Harmonized System (HS) description of the good. The description can include part number(s) in addition to the full description. If the Certification of Origin covers a single shipment of a good, indicate, if known, the invoice number related to the exportation.
- Field 7: For each good described in the certification, identify the six digit HS tariff classification number for each good as specified in the Rules of Origins set forth. If the good is subject to a specific rule of origin that requires eight digits, identify the HS tariff classification to an eight digit level.
- Field 8a: For each good described in the certification, state which Origin Criterion (A through D) is applicable. The Rules of Origin are contained in Chapter Four and Article 4.2. NOTE: In order to be entitled to preferential tariff treatment, each good must meet at least one of the criteria below.

ORIGIN CRITERIA

- A Wholly obtained or produced entirely in the territory of one or more of the Parties, as defined in Article 4.3; (Wholly Obtained or Produced Goods);
- B Produced entirely in the territory of one or more of the Parties using non-originating materials provided the good satisfies all applicable requirements of Annex 4-B (Product-Specific Rules of Origin);
- C Produced entirely in the territory of one or more of the Parties exclusively from originating materials; or
- D Except for a good provided for in Chapter 61 to 63 of the Harmonized System:
 - (i) Produced entirely in the territory of one or more of the Parties;
 - (ii) one or more of the non-originating materials provided for as parts under the Harmonized System used in the production of the good cannot satisfy the requirements set out in Annex 4-B (Product-Specific Rules of Origin) because both the good and its materials are classified in the same subheading or same heading that is not further subdivided into subheadings, or the good was imported into the territory of a Party in an unassembled or a disassembled form but was classified as an assembled good pursuant to rule 2(a) of the General Rules of Interpretation of the Harmonized System; and
 - (iii) the Regional Value Content of the good, determined in accordance with Article 4.5 (Regional Value Content), is not less than 60 percent if the transaction value method is used or not less than 50 percent if the net cost method is used, and the good satisfies all other applicable requirements of this Chapter.
- Field 8b: Identify the Country of Origin (CA, US, or MX) for each good listed in this certification.
- Field 9: This document must be completed, signed, and dated by the Certifier. The date must be the date the Certification was completed and signed. State the legal name, address, telephone, and email address of the responsible official or authorized agent of the Certifier. The certification can accept an electronic or digital signature, as long as it is an actual representation of the signer's signature and not a signature font. Example of an electronic or digital signature is a scanned image of the signer's ink signature. The total number of pages of the certification should be provided on the main page where it states "this Certification consists of _____ pages, including all attachments."



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USMCA – Certification of Origin Form

CONTINUATION SHEET

If additional lines are needed, use this Continuation Sheet. Continuation page numbers should be inserted at the bottom of each page.

1a. BLANKET P	ERIOD (dd/mm/yyyy)		SHIPMENT	YES				
FROM:	To:	Invoice Number:						
1. EXPORTER'S	NAME AND ADDRESS	2. IMPORTER'S NAME AND ADDRESS						
TELEDHONE.			TELEPHONE:					
TELEPHONE:								
EMAIL ADDRESS:	•	EMAIL ADDRESS:						
TAX ID NO.:		TAX ID NO.:						
6a. PART	6b. DESCRIPTION OF GOOD(S)		7. HS TARIFF	8a. ORIGIN	8b. COUNTRY			
NUMBER			CLASSIFICATION	CRITERION	OF ORIGIN			

Continuation Sheet - Page No.: _____