U.S. Customs and Border Protection

ACH DEBIT APPLICATION

U.S. Customs and Border Protection Automated Clearinghouse Daily Statement Payment Program
(This application will be used to communicate account information to Federal Reserve Bank of Cleveland)

Action to be Taken:

☐ Add

☐ Change   Effective Date: _____   Current Payer Unit Number: _____
(Effective date should be at least 3 business days in the future)

☐ Delete   Effective Date: _____   Current Payer Unit Number: _____

Payer Information

Payer Importer Number **(EIN) OR** 3 digit filer code: _____
(Include Suffix)

Payer Company Name: _____

Payer Company Address: _____

Payer City, State, Zip: _____   Payer State: _____   Payer Zip: _____

Payer Contact Name: _____

Payer Email Address: _____

Payer Telephone: _____   FAX: _____
(Enter country code if applicable)   (Enter country code if applicable)

_____   _____
Name of Authorizing Company Official (Please type or print)   Signature of Authorizing Company Official

Banking Information

Bank must be a National Automated Clearinghouse Association (NACHA) participant.

Bank Name: _____   Address: _____

City: _____   State: _____   Zip: _____

ACH Bank Transit
Routing Number: _____   ACH Bank
Account Number: _____

To ensure the accuracy of the account information, it is requested that written verification (obtained from your bank) be completed and accompany this application. The ACH payer will be responsible for defaults, which result from incomplete or erroneous account information when written verification is not submitted and certified by bank personnel. Please ensure that the bank transit routing and account numbers on the ACH application have been verified by your bank before sending to the Revenue Division.

Broker/Filer Information

Name of CBP Broker/Filer: _____   3 digit filer code: _____

Contact Name: _____   Telephone: _____   Fax: _____

ABI Representative of Customs Broker/Filer: _____

This application may be faxed, mailed or e-mailed to the ACH Coordinator at:

Revenue Division
ACH Debit Applications
6650 Telecom Drive, Suite 100
Indianapolis, IN 46278

Telephone: (317) 298-1200 Ext. 1098
FAX: (317) 298-1259
Email: ACH-Customs@cbp.dhs.gov

Privacy Act Statement

AUTHORITY: CBP is authorized to collect the information requested on this form pursuant to 19 CFR §§ 24.25 and 24.26; and to collect Social Security numbers (SSN) under Executive Order (E.O.) 9397, as amended by E.O. 13478.

PURPOSE: CBP is requesting this information to allow the importer of record to make electronic payments for import related duties, taxes, fees, and interest, deferred tax payments, or bill payments, etc., through the Automated Clearinghouse (ACH) debit or credit process. ACH debit allows the filer to voluntarily select to authorize the Treasury-designated ACH processor to electronically debit the payer's bank account; ACH credit is an optional payment method that allows the payer to transmit statement processing payments through its financial institution, directly to the CBP account maintained by the Department of the Treasury.

ROUTINE USES: Consistent with DHS's information-sharing mission, the information requested on this form may be shared with other DHS Components to carry out national security, law enforcement, immigration, trade, or other homeland security functions. Information may also be shared with appropriate federal, state, local, tribal, territorial, foreign, or international government agencies. This sharing will assist DHS in exercising control over the customs financial transactions of import-related duties, taxes, fees, and interest associated with the movement of merchandise through international commerce. A complete list of the routine uses can be found in the system of records notice associated with this form, "DHS/CBP-001 Import Information System (IIS)." The Department's full list of system of records notices can be found on the Department's website at: http://www.dhs.gov/system-records-notices-sorns.

CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION: Providing this information to is voluntary. However, failure to provide this information may result in the inability for an importer to participate in ACH Debit or Credit payment programs to pay Duties taxes and Fees related to entry. An alternative for not participating in ACH is to have the importer work as a Non-ACE Portal Account holder and make all payments due through a broker, who is an ACE Portal Account holder. Brokers are able to place eligible entry summaries for activated non-portal accounts on a broker or importer statement. For further details, please see the Federal Register Notice (FRN), 70 FR 61466, published on October 24, 2005, announcing the establishment of non-portal accounts, as well as any other applicable FRNs, at the following link: **https://www.cbp.gov/trade/priority-issues/revenue/revenue-modernization**.

PROCEDURE

CONTENTS

1. PURPOSE

1.1 These step-by-step instructions help the user complete and submit a CBP Form 400

2. SCOPE

2.1 This describes the roles, tools, and activities involved in filing a CBP Form 400, which is used to enroll the user in CBP's ACH debit program. CBP's ACH Debit program is an electronic payment option allowing participants to efficiently pay CBP duties, taxes, and fees. Further detail is available at CBP's ACH Debit page.

3. PROCEDURE

3.1 Before completing the CBP Form 400, review the following procedure, which is broken into the four sections listed on the CBP Form 400: Action to be Taken, Payer Information, Banking Information, and Broker/Filer Information.

3.2 ACTION TO BE TAKEN:

ITEM	INPUT
Add	For Initial Enrollment: Select "Add," then complete each section of the application.
Change	To Update Existing Enrollment: Select "Change," then include an "Effective Date" three or more business days in the future, as well as your "Payer Unit Number" (PUN). "Change" can be used to update any part of your company's: name, address, contact name, phone number, email address, and/or banking information.
Delete	To Delete Enrollment: Select "Delete," then include an "Effective Date" and your PUN. Warning: Deleting the PUN will prevent its' future use in the ACH payment authorization transaction.

3.3 PAYER INFORMATION:

ITEM	INPUT
Payer Importer Number (EIN) OR 3 digit filer code	**Importer number:** The Payer Importer Number is an 11 digit number. It usually is the 9 digit IRS business tax ID number (aka EIN) plus a two-digit suffix, for example XX-XXXXXXX00. Typically the final 2 digits are used to identify a subsidiary company. If you are not a subsidiary company, most likely your suffix is '00' (**suffix must be included**). **Filer Code:** A unique 3 character (alphabetic, numeric, or alpha numeric) entry filer code assigned to all licensed brokers, and self-filing importers filing CBP entries.
Payer Company Name	Name of company associated with the provided Importer Number or Filer Code.
Payer Company Address	Address of company associated with the provided Importer Number or Filer Code.
Payer City, State Zip	City, State, and ZIP of company associated with the provided Importer Number or Filer Code.
Payer Contact Name	Contact at company associated with the provided Importer Number or Filer Code. Note this contact will be the company representative eligible to receive the PUN, as well as any additional communication related to the account.
Payer Email Address	Email Address of the "Payer Contact." Reminder: the PUN, as well as any additional communication related to the account, will be sent to this email address.
Payer Telephone	Telephone number of company associated with the provided Importer Number or Filer Code
FAX (optional)	FAX number of company associated with the provided Importer Number or Filer Code
Name of Authorizing Company Official	Company officer or representative with the authority to commit the requesting organization.
Signature of Authorizing Company Official	Signature of the officer or representative.

3.4 BANK INFORMATION

ITEM	INPUT
Bank Name	Bank Name
Address	Bank Address
ACH Bank Transit Routing Number	9-digit US bank routing number (must begin with a 0, 1, 2, or 3). If necessary, contact your bank to obtain this number.
ACH Bank Account Number	The bank account number, which is to be used in the ACH payment process. This number is obtained from the bank.

3.5 BROKER/FILER INFORMATION

ITEM	INPUT
Name of CBP Broker/Filer	The name of the Broker/Filer the payer will use in the ACH payment authorization transmission. If payer uses more than one Broker/Filer, provide the name of only one.
3 digit filer code	The filer code of the listed Broker/Filer.
Contact Name	Contact person of the listed Broker/Filer.
Telephone	Telephone numberof Broker/Filer.
FAX (optional)	FAX number of Broker/Filer.
ABI Representative	The name of the ABI Client Representative of the related Broker/Filer the payer will use in the ACH payment authorization transmission.

4. SUBMISSION

4.1 We continue to accept submissions via email, fax, and mail. For the most efficient processing, please submit your completed form to the provided email address (ACH-Customs@cbp.dhs.gov).

Once you submit your application, we perform some basic application checks. If a problem is found, the application will be rejected and the registration will be delayed. You must address all errors and submit again. If no problem is found, your application is in queue for processing. For new applications, the process can take up to 15 business days from the date of receipt. For changes to your already existing ACH account, allow at least 3 business days for processing.

4.2 Once the ACH account is established, a unique PUN is assigned to each payer and is used for all ACH transactions. For security purposes, your PUN will only be released to the point of contact listed on your CBP Form 400.