

ANNEX V
QUARTERLY REPORT ON FUEL, BIOFUEL AND LUBRICANT TRADING
ACTIVITIES



1. APPLICANT'S IDENTIFICATION		
Name or Company Designation:		
Type of Identification Document:	Identification Document No.:	
Taxpayer Identification No.:		
Certificate of registration No.:	Share Capital:	
License to do Business No.:		
Representative:		
Address:		
Municipality :	Administrative Post:	Suco:
		Aldeia:
Telephone:	Fax No.:	
E-mail address:		

2. TYPE OF APPLICATION	
Please tick "√" against the appropriate box:	
Quarterly Report covering the: <input type="checkbox"/> 1 st Quarter of the Year <input type="checkbox"/> 2 nd Quarter of the Year <input type="checkbox"/> 3 rd Quarter of the Year <input type="checkbox"/> 4 th Quarter of the Year	Activity registered by the Applicant: <input type="checkbox"/> Import of Fuel, Biofuel and Lubricant <input type="checkbox"/> Export of Fuel, Biofuel and Lubricant

3. REPORT OF ACTIVITIES UNDERTAKEN
Please tick "√" against the appropriate box to confirm the activities that Applicant has undertaken and provide the information required below:

Fuel	Import/Export /Trade	Seller (in case of Importation or Trading)	Buyer (in case of Exportation or Trading)	Quantity
Domestic or Industrial Propane	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Domestic or Industrial Butane	<input type="checkbox"/> Import <input type="checkbox"/> Export			
AutoGas	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Petrol / Gasoline	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Kerosene	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Automotive Diesel	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Maritime Diesel	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Fuel Oil	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Heating Oil	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Avgas	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Jet-A1	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Maritime Bunker Fuel	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Turbo Generator Fuel	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Cutback Asphalt MC250	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Cutback Asphalt RC-2	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Asphalt 80/100	<input type="checkbox"/> Import <input type="checkbox"/> Export			
Asphalt 100/200	<input type="checkbox"/> Import <input type="checkbox"/> Export			

4. STATEMENT OF APPLICANT

NOTE: This form and any relevant additional information is of public record and will remain on file. By filing this form you are declaring that you will not use the information you receive now or afterwards for any illegal or unlawful purposes

I certify that all of the information contained in this form is complete and accurate. I understand the information provided to the ANPM is subject to review and audit. The detailed records which substantiate the information contained herein are available upon request.

Signature: _____

Place: _____ Date: __/__/____

To be completed by ANPM

ANPM Stamp

Signature of the individual in charge

Note:

By the fifteenth day of the first month of each Quarter Licensed Fuel Importers, Exporters and Traders shall submit this "Quarterly Report on Fuel, Biofuel and Lubricant Trading Activities" to the ANPM, which includes all relevant information on the transactions performed during the preceding Quarter.

**ANNEX VI
DECLARATION FOR FREE CIRCULATION**



DECLARATION FOR FREE CIRCULATION

THE ANPM, IN ITS CAPACITY OF SUPERVISORY ENTITY OF THE TIMOR-LESTE DOWNSTREAM SECTOR AND IN THE EXERCISE OF ITS LICENSING POWERS, PURSUANT TO ARTICLE 11.3 OF REGULATION NO. .../2016, OF ..., HEREBY GRANTS THE FREE CIRCULATION FOR THE _____ INCLUDED IN THE TRANSACTION AUTHORIZATION NUMBER

Name or Company Designation:		
Type of Identification Document:	Identification Document No.:	
Taxpayer Identification No.:		
Certificate of registration No.:	Share Capital:	
License to do Business No.:		
Address:		
District:	Administrative Post:	Suco:
Telephone:	E-mail address:	

Approving Official		ANPM's Stamp	
Name:			
Position:			
Signature of the individual in charge			
_____		Dated:	_____