**Instructions for completing the form**

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| 1. REPORTING PERSON | *Enter the name of the company or your name and surname, address, tax identification number, country of establishment, contact person email and phone number of the reporting person.*  *(All fields are obligatory.)* |
| 2. PRODUCTION, PROCESSING, STORAGE | *The fields under point 2 of the form are* ***filled in by a person who will start production, processing or storage of products*** *or by a person who has already submitted an activity report and submits changes or additions to the report. The fields are not filled in in the case of reporting the movement of products.* ***The movement of products is reported in this form under point 3. TRANSPORT/MOVEMENT.***  *Mark with X whether this is first report or change or addition of report. Enter the estimated date of the start or change of activity. Enter the name of the company or first and last name, address, tax number of the person who produces, processes or stores and the address of the location of the activity. If the activity is performed at several locations, all locations are entered. Mark with X to indicate on which product group and type of activity the report refers to (e.g. production and storage of electronic cigarettes - in the line "electronic cigarettes" an X is marked in the columns "production" and "storage"). In the case of product groups where marking of activities is disabled by a crossed out field, special control is not carried out (e.g. production and processing of tobacco for heating).*  *The description of the products or the indication of the type of products must cover all products with which the activity is carried out (e.g. lubricating oils, lubricating preparations, organic solvents, paint thinners; e.g. electronic cigarettes with nicotine, disposable electronic cigarettes, reusable electronic cigarettes, flavors, propylene glycol, heating tobacco). Enter the tariff code in which the products are classified.* |
| 3. *TRANSPORT/MOVEMENT* | *The fields under point 3 of the form must be* ***filled in for each shipment that is transported on the territory of Slovenia****. Enter the name of the company or first and last name, address, country of company headquarters and the tax number of the carrier, consignor and consignee. Enter the address of the shipping location, the address of the delivery/unloading location, the date and time of the start of shipping, and the estimated date of delivery/unloading.*  *Enter the registration number of the vehicle and the trailer and the CMR number.*  *In the Product group column, enter the corresponding number for each product group, namely:*  *1. Products from point 1 of paragraph 1 of Article 101. ZTro-1,*  *2. Machines and parts of tariff code 8478,*  *3. Electronic cigarettes,*  *4. Heating tobacco and*  *5. Unprocessed tobacco.*  *For each product, enter the trade name and tariff code. In the case of the* ***electronic cigarette or heating tobacco product group, the EAN code is also entered.***  *Enter the quantity in units of measure (e.g., kg, l, ml) and the type of cargo (e.g., road transport tank, IBC, barrel, cartridges).* |
| Notes: | *Any notes to clarify the report are entered.* |