



JABATAN ALAM SEKITAR, TAMAN DAN REKREASI
KEMENTERIAN PEMBANGUNAN
BRUNEI DARUSSALAM

PRE-APPLICATION FORM
IMPORTATION OF GAS PERMIT UNDER THE MONTREAL PROTOCOL

A. IMPORTER'S DETAILS

1. Name Of Company Importer & Registration Number:

2. Name Of Export Company & Country:

3. Name Of Authorized Agent/Forwarding Company (*if applicable*):

4. Vessel Flight/Vehicle No. (*if applicable*):

5. Estimated Arrival Date (*if applicable*):

B. IMPORT DETAILS

| No. | TYPE OF GAS | PLEASE TICK <input type="checkbox"/> THE SELECTED ITEM |
|-----|--|--|
| 1. | Ozone Depleting Substances (ODS) e.g. HCFC-22/R-22 | <input type="checkbox"/> |
| 2. | Hydrofluorocarbons (HFCs) e.g. HFC-134a, R404A, R410A, etc. | <input type="checkbox"/> |
| 3. | Alternatives to HFCs e.g. Hydrofluoroolefins (HFOs), etc. | <input type="checkbox"/> |

| No. | TYPE OF GAS | NO. OF CYLINDERS | WEIGHT (KG) PER CYLINDER | WEIGHT (KG) TOTAL |
|-----|-------------|------------------|--------------------------|-------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

C. DOCUMENT ATTACHMENTS

| No. | ITEM | PLEASE TICK <input type="checkbox"/> THE SELECTED ITEM |
|-----|--|---|
| 1. | Invoice/Purchase Order | |
| 2. | Material Safety Data Sheet (MSDS) | |
| 3. | Summary of Distribution List | |
| 4. | Summary of Importing and Reporting Information | |

D. OZONE DEPLETING SUBSTANCES (ODS) QUOTA (if applicable)

| No. | QUOTA | UNIT/KG |
|-----|---|---------|
| 1. | Quota of HCFC-22/R-22 allocated for 2025 | |
| 2. | Quota of HCFC-22/R-22 remaining (balance) | |

E. HYDROFLUOROCARBONS (HFCs) QUOTA (if applicable)

| No. | QUOTA | tCO ₂ eq. |
|-----|-----------------------------------|----------------------|
| 1. | Quota of HFCs allocated for 2025 | |
| 2. | Quota of HFCs remaining (balance) | |

F. DECLARATION BY IMPORTER

I declare that the information in Section A, B, C, D and E is complete and correct.

Signature

.....
Name

Date

G. VERIFICATION BY NATIONAL OZONE UNIT [FOR OFFICE USE ONLY]

I verify that the information in Section A, B, C, D and E is complete and correct.

Signature

.....
Name

Date

**H. APPROVAL BY HEAD OF INTERNATIONAL UNIT / HEAD OF DEPARTMENT
[FOR OFFICE USE ONLY]**

I verify that the information in Section A, B, C, D and E is complete and correct and therefore, the application is:

Approved **Rejected**

Signature

.....
Name

Date