



Consulado General y Centro de Promoción
de la República Argentina en
Nueva York

FORM FOR CONSULAR INTERVENTION OF COMMERCIAL DOCUMENTS

FILL ONLY ONE FORM FOR ALL CONSULAR INTERVENTIONS REQUESTED TOGETHER –(All fields are mandatory)

DATE: __ / __ /20__

APPLICANT INFORMATION

Company: _____

Name of Representative: _____

Id number (passport or driver's license): _____

E-mail: _____

Phone number: (____) _____ - _____

Delivery method. Circle one:

Self	USPS	UPS	FedEx	DHL	Other
Self	USPS	UPS	FedEx	DHL	Other

Delivery Back method. Circle one:

CERTIFICATION FORM

	Type of Document (C.o.O, Affidavit, etc.)	Name of Exporter/Company/ Requester	Name of chamber of Commerce	Name of chamber's representative signing document	PROCESS		Mark with X if hazardous products*
					REGULAR \$200	RUSH \$240	
<u>1</u>							
<u>2</u>							
<u>3</u>							
<u>4</u>							
<u>5</u>							
<u>#</u>							

"VISTO CONSULAR" FORM

	Type of Document (Invoice, Price List, etc.)	Name of Exporter/Company/Requester	PROCESS	
			REGULAR \$200	RUSH \$240
<u>1</u>				
<u>2</u>				
<u>3</u>				
<u>4</u>				
<u>5</u>				
<u>#</u>				

* Process for document of certain products such as hazardous materials, chemicals, explosives, etc. will take longer than regular

Money Order for total amount: \$ _____

Applicant Signature: _____