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Please fill in the form below.

						Date ;		
To Export Administration Dept. in KSS Co., Ltd.								
Request for Export Certificate								
<customer information=""> Company Name</customer>								
Company Name					ne ite *1)			
Address								
Department					Title			
Pers	on in charge							
Contact address		TEL : E-mail :		FAX :				
<export information=""></export>								
Exporter (Company name)								
	Customer (Of							
Final Destinaton (Country Name)								
Usage								
	(as detail	as possible	sible)					
			Weapon use : Yes No Re-export : Yes No					
	R	equired date	3					
Remark								
(other info. to be inform								
<products be="" exported="" to=""></products>								
Nº	Product	ts	KSS Model Number	KSS	Drawing No.	Equipment		
1								
2								
3								
4								
5								
※Product Name : Please select our Product to be exported. Any questions should be asked to KSS representative.								
Ball Screws Lead Screws Resin Lead Screws MoBo Resin MoBo Si-MoBo Actuators Cables Grease								

All of information will be used only export administration only.

In case of luck of information, KSS may not be able to issue certification.

Note 1) Please fill in "Company Name on Certificate" if any difference between your company name and address on certificate.

Note 2) Please fill in all of items as detail as possible for secure judgement.