

**Request for cancellation**

Transaction identifier	
MRN	Reference number
Entry summary declaration / Entry summary declaration amendment (IE315 / IE313)	
Summary declaration for temporary storage (IE344)	
Exit summary declaration / Exit summary declaration amendment (IE615 / IE613)	
Other	

Declarant / Carrier / Representative
Business ID and suffix

**Contact information**

Street address:	Postal address
Telephone	Fax
E-mail	

We are requesting to cancel the AREX declaration with the above-mentioned transaction identifier / MRN. Reason:

MRN / transaction identifier (if available) of the replacing declaration:

Requesting party  Declarant  Representative  
 Carrier

**SIGNATURE**

Place and date	Signature and clarification of signature
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Please email the signed and scanned application to [spake.arex@tulli.fi](mailto:spake.arex@tulli.fi).