



TRADE OBSTACLES ALERT

Identify and remove obstacles

Report a Trade obstacle Paper questionnaire

Note: This questionnaire is intended only **for individuals that may not have access to the Trade Obstacles Alert platform** (www.obstaclesaucommerce.org). The questionnaire allows you to enter details of the problem encountered while importing and/or exporting your products. Once completed, you can provide the questionnaire to your trade association (or other support centers), which will be responsible for entering the information into the online platform, or you can directly send a scanned copy to the administrators of the platform at the following address: tradeobstacles@intracen.org

Please note that questions marked with an asterisk () are required.*

A. PROFILE OF THE COMPLAINANT

1. **Title:**

 M Ms

2. **First name:***

3. **Last name:***

4. **E-mail address:**

5. **Telephone number (fixed line and/or mobile):**

6. **Name of your company, association or other organization:***

7. **Job title within your organization:**

8. **In which country is your organization located:**



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9. Type of organization:*

- Company importing and/or exporting goods
- Business or sectoral association
- Clearing and forwarding company
- Government agency
- Trade Support Institution (TSI) or Trade Promotion Organization (TPO)
- University or research institute
- Other (*please specify*): _____

If it is a company:

9. a. Main activity of your company:

- Company importing and/or exporting goods
- Business or sectoral association
- Clearing and forwarding company

9.b. Number of employees of your company:

- Less than 10 employees
- 10 to 49 employees
- 50 to 200 employees
- More than 200 employees



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B. CONTEXT OF THE TRADE OBSTACLE

10. You faced an obstacle when:*

- Exporting Importing

11. Country of destination/origin:*

12. Describe the obstacle you faced:* *(Provide a detailed description of the problem. Further details will be asked in the following questions.)*

13. When did you face the obstacle? * (dd/mm/yyyy)

14. Have you faced this obstacle before? *

- Yes, this problem is recurrent
 No, this is the first time this happens

15. Where did the obstacle occur?*

- In the destination country
 In the origin country
 Transit country (*please specify*) : _____



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16. Specify the exact location in which you faced the obstacle:*

- Airport (*please specify*): _____
- Border post (*please specify*): _____
- Government institution (*please specify*): _____
- Road block (*please specify*): _____
- Seaport (*please specify*): _____
- Other (*please specify*): _____

C. PRODUCT DETAILS

17. Which is the main product affected by the obstacle?*

(Please provide the HS six digit code or the Common External Tariff (CET) code of the affected product. If needed feel free to add also additional information on the product content.)

D. OBSTACLE DETAILS

18. Which type of obstacle did you face?*

(Please select from the following categories the type of obstacle hindering your business.)

- Regulatory problem (*e.g. export bans, mandatory standards on the quality of the product or mandatory inspection procedures*)
- Administrative burdens related to regulations (*e.g. large number of documents or administrative windows*)
- Information / transparency issues (*e.g. lack or wrong information*)
- Discriminating behavior of officials
- Time constraints (*e.g. delays or tight deadlines*) Informal or unusually high payment
- Lack of sector-specific facilities
- Lack of recognition/ accreditations (*e.g. of nationals certificates or facilities*)
- Other (*please specify*): _____

19. Is there a regulation at origin of the obstacle you faced?*

- Yes, an Ivorian regulation
- Yes, a trading partner regulation
- No, there are no regulations involved
- I don't know



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If there is a regulation at the origin of the obstacle:

19.a. Please specify the name of the document referred to the reported regulation:

E. ADDITIONAL INFORMATION

20. Would you like to attach a proof of the obstacle faced (e.g. related documents, photos, etc.)?

- Yes (*please specify the name of the document*): _____
 No

21. Are there any final comments or recommendations that you would like to add? (*If you have any suggestions that could help us to solve the problem or to prevent it, please write them here.*)

Please forward the completed questionnaire to your association (or other support centers) or send a scanned copy to: tradeobstacles@intracen.org. The obstacle you faced will be recorded in the platform and the competent authorities will answer as soon as possible.