



USAID | WEST BANK/GAZA

FROM THE AMERICAN PEOPLE

October 22, 2008
2009-WBG-01

TO: All USAID/West Bank and Gaza Contractors, Grantees and Recipients


Subject: Movement Requests from Israel to Gaza

Dear Implementing Partners,

Effective immediately, the Government of Israel requested the attached forms be completed for any movement requests into Gaza. The forms are to be completed for movement requests from Israel to Gaza for foreigners, Israeli ID holders and Palestinians. Additionally, a form must be completed for coordination of goods and supplies via trucks to Gaza. Completed forms should be sent to psu-permits@usaid.gov for processing.

Please address any concerns regarding this notice to Mr. Fouad Salman, Program Support Liaison at fsalman@usaid.gov.

Sincerely,


Ron W. Breen
Acting Director,
Office of Contracts Management
USAID West Bank & Gaza

Attachments:

Palestinian Staff Request for Exiting the Gaza Strip
Coordination Liaison Administration to the Gaza Strip
Coordination Request for Goods and Supplies to Gaza

Tel Aviv: American Embassy
71 Hayarkon Street
Tel: 972-3-511-4848
Fax: 972-3-511-4888

Jerusalem: American Consulate General
P.O. Box 290
Tel: 972-2-622-7230
Fax: 972-2-625-9484



מנהלת התאום והקישור לרצועת עזה
Coordination Liaison Administration to the
Gaza Strip

Palestinian Staff Request for Exiting the Gaza Strip

Application Form for International Organizations & Official Representatives

Date of Submission -

Organization Name			
Full Name			
ID Number			
Date of Birth			
Mobile Number			
Description about the staff member's Duty / Position			
Period of employment in the Organization			
Destination			
Purpose of the Staff Member's Travel			
Schedule during the travel			
Holds a valid Permit (Y/N)			
Requested Date of Travel			

Manager of the Organization's statement of commitment -

Full details of the aforementioned -

Attachments -

- All requests are to be verified with our office before arriving to Erez Crossing

Contacts:
0506-246509
arbelgaza@gmail.com

International Organizations Dept.
Gaza CLA



מנהלת התאום והקישור לרצועת עזה
**Coordination Liaison Administration to the
 Gaza Strip**

Coordination request for Goods & Supplies to Gaza

Application Form for International Organizations & Official Representatives

Organization –

Submission date –

Date of indicated transfer –

Destination in Gaza (Location and receiving party) –

Description of Items –

Donation number (if relevant) -

Attachments included -

Driver's Name	ID Number	Truck Plate Number	Cargo

Shipment details (only for Medicines & Medical equipment/accessories/supplies):

Purchased In Israel	Purchased abroad	Brought from/Purchased in WB	Donation
<ul style="list-style-type: none"> • Invoice specifying what was purchased 	<ul style="list-style-type: none"> • Customs Clearance • Detailed list of Cleared items 	<ul style="list-style-type: none"> • West Bank Health coordinator's clearance • Detailed list of Cleared items 	<ul style="list-style-type: none"> • Donation Number

Organization's Statement of commitment -

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מנהלת התאום והקישור לרצועת עזה
Coordination Liaison Administration to the
Gaza Strip

Request for entry to The Gaza Strip

Application Form for International Organizations & Official Representatives

Foreigners / Israeli ID

Date of Submission -

Organization Name		
Description about the Organization's activities in Gaza		
Full Name (including father's and grandfather's names)		
Nationality		
Passport Number		
Date of Birth		
Date of Travel	In to Gaza -	Back to Israel -
Mobile Number		
Purpose of entry to Gaza		
Authorities / Bodies Cooperating with in Gaza		
Locations of Work in Gaza		

Organization manager statement of commitment -

Full Details of the aforementioned -

- Time of process for each individual will be up to 5 working days.
- All requests are to be verified with our office before arriving to Erez Crossing.

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