

SHIPPER

Company Name _____ Phone _____

Address _____

Address _____

City _____ State _____ Zip _____

SHIPPERS EIN _____



Total Connection
LOGISTIC SERVICES

Shipper Requests Insurance: YES NO

WITHOUT ADDITIONAL COVERAGE, OUR LIABILITY IS LIMITED TO THE EXTENT PROVIDED BY LAW, OUR BILLS OF LADING (IF ISSUED) OR \$50.00, WHICHEVER IS LESS.

Equipment Type: _____
PLEASE SPECIFY (Ex: Deferred, Standard, Express)

CONSIGNEE

Company Name _____ Phone _____

Address _____

Address _____

City _____ State/Province _____ Zip/Postal _____

Country _____

SHIPMENT INFORMATION

Pcs	Weight (lbs)	Length (inch)	Width (inch)	Height (inch)	Description	HTS#	Value for Customs

HAZARDOUS BY AIR: YES NO

PAYMENT AND ROUTING

SELECT ONE

- EX-WORKS / FREIGHT COLLECT Freight charges are collected at destination.
- FREIGHT PREPAID Shipper pays up to destination port.
- DAP Shipper pays all charges up to Consignee's door. With the exception of duties and taxes.
- DDP Shipper pays all charges up to Consignee's door. Including duties and taxes.
- OTHER Please Specify: _____

BY SIGNING SHIPPER IS AGREEING TO THE TERMS AND CONDITIONS SET FORTH BY TOTAL CONNECTION LOGISTICS. You confirm that said shipment does not require a U.S STATE DEPARTMENT LICENSE FOR EXPORT AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT. SHIPPER IS AUTHORIZING TOTAL CONNECTION TO ACT IN THEIR NAME AND ON THEIR BEHALF TO PREPARE ANY EXPORT DOCUMENTS TO SIGN AND ACCEPT ANY DOCUMENTS RELATING TO SAID SHIPMENT.

Signature _____

Date _____

ALL SERVICES AND TRANSACTIONS ARE SUBJECT TO OUR TERMS AND CONDITIONS OF SERVICE (NCBFAA 6/94)

Once completed & signed, please return to Total Connection Logistics via scan/email (international@totalconnection.com)

Print Form