

ISF + 10+2 (INFORMATION REQUIRED FOR FILING)

SAILING DATE:

ARRIVAL DATE:

Carrier:

MASTER BILL OF LADING:

SCAC Code:

HOUSE BILL OF LADING:

SELLER: (name & address)

BUYER: (name & address)

SHIP TO: (name & address)

CONTAINER LOADING LOCATION: (name & address)

CONSOLIDATOR: (name & address)

MANUFACTURER: (name & address)

TARIFF NUMBER:

COUNTRY OF ORIGIN: