

SHIPPER'S LETTER OF INSTRUCTION

AIR / SEA (please specify)

SHIPPER		<h2 style="text-align: center;">INTRAMAR PTY. LTD.</h2> <p style="text-align: center;">INTERNATIONAL FREIGHT FORWARDING</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> MELBOURNE OFFICE: TEL: 03 9338 0833 Fax: 03 9330 1179 </td> <td style="width: 50%; border: none;"> SYDNEY OFFICE: TEL: 02 9700 9644 FAX: 02 9700 9655 </td> </tr> <tr> <td style="border: none;"> BRISBANE OFFICE: TEL: 07 3868 3122 FAX: 07 3868 3922 </td> <td style="border: none;"> ADELAIDE OFFICE: TEL: 08 8440 2438 FAX: 08 8440 2437 </td> </tr> </table>				MELBOURNE OFFICE: TEL: 03 9338 0833 Fax: 03 9330 1179	SYDNEY OFFICE: TEL: 02 9700 9644 FAX: 02 9700 9655	BRISBANE OFFICE: TEL: 07 3868 3122 FAX: 07 3868 3922	ADELAIDE OFFICE: TEL: 08 8440 2438 FAX: 08 8440 2437
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CONSIGNEE		SPECIAL INSTRUCTIONS: 							
NOTIFY PARTY									
Port of Departure		B/LADING REQUIRED: ORIGINAL- IF ORIGINAL HOW MANY COPIES REQUIRED? 							
Port of Destination									
EXPRESS RELEASE									
No. of Pkgs	No. of Pallet	Gross Weight Specify kgs or lbs	Measurements (cms)	Marks & Numbers	Nature and Quantity Of Goods				
				Pls specify (cargo must be marked)					
Total=		Total weight Kg							

PAYMENT OF CHARGES – PLEASE SELECT			LETTER OF CREDIT Yes <input type="checkbox"/> No <input type="checkbox"/>
FREIGHT	PREPAID <input type="checkbox"/>	COLLECT <input type="checkbox"/>	VALUE FOR CUSTOMS:
FOB CHARGES	PREPAID <input type="checkbox"/>	COLLECT <input type="checkbox"/>	ECN NO:
OTHER – PLEASE SPECIFY	PREPAID <input type="checkbox"/>	COLLECT <input type="checkbox"/>	COUNTRY & STATE OF ORIGIN: / QLD
DOOR TO DOOR SHIPMENTS (PAID BY SHIPPER)			AHECC:
PLEASE SELECT ONE OF THE FOLLOWING			DUTY DRAWBACK Yes <input type="checkbox"/> No <input type="checkbox"/>
DDU (ALL OVERSEAS CHARGES EXCL DUTY & TAX)	<input type="checkbox"/>		INSURANCE BY INTRAMAR: Yes <input type="checkbox"/> No <input type="checkbox"/>
DDP (ALL OVERSEAS CHARGES INCL DUTY & TAX)	<input type="checkbox"/>		Amount AU\$0.00
DO YOU REQUIRE INTRAMAR TO PICK UP SHIPMENT			YES <input type="checkbox"/> NO <input type="checkbox"/>

IMPORTANT – “DANGEROUS GOODS DECLARATION”

The shipper certifies that the particulars on the face hereof are correct
 I, _____ being a duly authorised representative of the exporter certify that; (please complete the applicable option below)

NON HAZARDOUS

NONE of the cargo detailed in this instruction is classified in terms of the I.C.A.O./I.A.T.A. DANGEROUS GOODS REGULATIONS

Signature:..... Title:.....

HAZARDOUS

Included in the cargo detailed are items that are classified in terms of the I.C.A.O./I.A.T.A. DANGEROUS GOODS REGULATIONS.
PROPER SHIPPING NAME:

UN Number: _____ PKG: _____ Class: _____

Signature:..... Title:.....