

INSTRUCTIONS FORM

T1
T2

ExA / T1 - T2
DWS afW

CUSTOMER	LOCATION OF GOODS
Customer name: Account number: Street name: Zip code: Contact: Phone no./Fax no.: Reference no.:	Quay/Warehouse: Address: Pin codes: Date of arrival goods:

CUSTOMS DECLARATION DETAILS		
Vessel/barge:		
Import Cargo manifest details:		
Agent: IM7 T1/T1:	Article:	Lloyd's number: Item:
		Ship's number: B/L no.:

CONSIGNER	CONSIGNEE
Name:	Name:
Address:	Address:
Country of destination:	Office of destination:
Transit office:	

GOODS		
Container number(s):		
No. of packages:	Description of goods:	
Gross weight:	Net weight:	
Tariff no.:		
Appendices: Other remarks:		
Expected transport date:		
Closing date:	Departure date:	Reference: