Ocean Bill of Lading Instructions  ORIGINALS REQUIRED

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Shipper: | |  | | | Booking Number: | | | | | |
|  | | | | | Forwarder: | **FMC #:** | | | | |
|  | | | | | |
| Consignee: | |  | | | Rate Reference Number |  | | | | |
|  | | | | | Temperature Control Range  from:  **C** to: | | |  **C** | |  |
| Notify Party | |  | | | Dangerous Goods Consignments Require: Shipper’s Declaration  Container Packing Certificate Emergency Response Information | | | | | |
|  | | | | |
| Precarriage By: | | Port of Receipt: | | |
| Vessel: | | Port of Loading: | | | Type of Movement (traffic routing) | | | | | |
| Port of Discharge: | | Place of Delivery: | | | On Carriage By: | | | | | |
| **PARTICULARS FURNISHED BY SHIPPER** | | | | | | | | | | |
| **Container & Seal Number(s) Marks/Numbers** | | **Number of Packages** | **Description of Packages and Goods** | | | | **Gross Weight in Kilos** | | **Measurement in CBM** | |
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| Type of B/Lading  Original Express | PLEASE INDICATE REQUIREMENTS  Ocean Freight: Prepaid Collect Destination Terminals: Prepaid Invoice Payable By: | | | | | | | Prepaid | | Collect |
| Document Release Instructions | | | | Call for Pickup of Documents phone:  name: | | | |  | | |
| ext: | | |
| Special Instructions/Remarks | | | | | | | | | | |
| Signature of Shipper: | Date: | | | | | | |  | |  |