

SHIPPER'S LETTER OF INSTRUCTIONS

1. U.S. PRINCIPAL PARTY IN INTEREST (Name and address including ZIP code)				2. INLAND CARRIER (See note #2 below)		SHIP DATE		PRO NO.	
				Designated PICK UP LOCATION (if different than USSPI in field 1.) – please ensure to provide Telephone Number of Pick up Location in addition to the address & contact person					
3. EXPORTER EIN (IRS) NO.		4. PARTIES TO TRANSACTION <input type="checkbox"/> RELATED <input type="checkbox"/> NON-RELATED			5a. ULTIMATE CONSIGNEE		5b. ULTIMATE CONSIGNEE TYPE (Select one) <input type="checkbox"/> DIRECT CONSUMER <input type="checkbox"/> GOVERNMENT ENTITY <input type="checkbox"/> RESELLER <input type="checkbox"/> OTHER/UNKNOWN		
6. INTERMEDIATE CONSIGNEE				7. FORWARDING AGENT ROHLIG USA, LLC					
				8. POINT (STATE) OF ORIGIN OR FTZ NO.		9. COUNTRY OF ULTIMATE DESTINATION			
10. SHIPPER'S REF. NO.				11. DATE		12. HAZARDOUS MATERIAL <input type="checkbox"/> YES <input type="checkbox"/> NO			
13. SHIP VIA <input type="checkbox"/> AIR <input type="checkbox"/> OCEAN	For Ocean please specify Release Type: <input type="checkbox"/> Express Bill of Lading <input type="checkbox"/> Original Bill of Lading		For Ocean please specify Container Size: <input type="checkbox"/> LCL (less than container load) <input type="checkbox"/> 20' STD <input type="checkbox"/> 40' STD <input type="checkbox"/> 40' HC <input type="checkbox"/> OTHER: _____			14. TERMS OF SHIPPING <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> OTHER: _____			
15. GROSS WEIGHT (kilos):		16. SOLAS CERTIFICATION: <input type="checkbox"/>	By checking the Box 16 certification, I am certifying that the full shipment weight shown in box 15 is the Certified Gross Weight which may be added to the container tare weight and used as the Verified Gross Mass (VGM) under the Method 2 of the SOLAS VGM regulation effective July 1, 2016.						
17. D / F	18. SCHEDULE B / HTS NUMBER & COMMERCIAL COMMODITY DESCRIPTION <small>For Vehicles: VIN/Year, Make, Model and Vehicle Title Number are required</small>	19. QUANTITY IN SCHEDULE B / HTS UNITS	20. DDTC QUANTITY & DDTC UNIT OF MEASURE	21. SHIPPING WEIGHT (in Kilos)	22. CUBIC METERS	23. ECCN, EAR99 or USML CATEGORY NO.	24. EXPORT LICENSE NO., LICENSE EXCEPTION SYMBOL, DDTC EXEMPTION NO., DDTC ACM NO. or NLR	25. VALUE (US Dollars, omit cents) (selling price or cost if not sold)	26. LICENSE VALUE BY ITEM (if applicable) (US Dollars)
SPECIAL INSTRUCTIONS				27. C.O.D. AMOUNT → \$ _____					
				SHIPPER'S INSTRUCTIONS IN CASE OF INABILITY TO DELIVER CONSIGNMENT AS CONSIGNED: <input type="checkbox"/> ABANDON <input type="checkbox"/> RETURN TO SHIPPER <input type="checkbox"/> DELIVER TO: _____					
				SHIPPER REQUESTS INSURANCE <input type="checkbox"/> NO <input type="checkbox"/> YES \$ _____ <small>If Shipper has requested insurance as provided for at the above hereof shipment is insured in the amount indicated (recovery is limited to actual loss) in accordance with the provisions as specified in the Carrier's Tariffs Insurance is payable to Shipper unless payee is designated in writing by the shipper.</small>					
ROHLIG USA, LLC is hereby authorized to act as authorized agent for export control, U.S. Customs & Border Protection, and Census Bureau purposes to transmit such export information electronically that may be required by law or regulation in connection with the exportation or transportation of any goods on behalf of said U.S. Principal Party in Interest. The U.S. Principal Party in Interest certifies that necessary and proper documentation to accurately transmit the information electronically is and will be provided to the said Authorized Agent. The U.S. Principal Party in Interest further understands that civil and criminal penalties may be imposed for making false or fraudulent statements or for the violation of any U.S. laws or regulations on exportation and agrees to be bound by all statements of said authorized agent based upon information or documentation provided by the U.S. Principal Party in Interest to said authorized agent.									
28. NAME OF DULY AUTHORIZED OFFICER OR EMPLOYEE OF USPPI OR EXPORTER				I certify that all statements made and all information contained herein are true and correct and that I have read and understand the instructions for preparation of this document. I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false or fraudulent statements herein, failing to provide the requested information or for violation of U.S. laws on exportation (13 U.S.C. Sec. 305; 22 U.S.C. Sec. 401; 18 U.S.C. Sec. 1001; 50 U.S.C. App. 2410).					
SIGNATURE	Confidential – For use solely for official purposes								
TITLE	Export shipments are subject to inspection by U.S. Customs Services and/or Office of Export Enforcement								
DATE	29. AUTHENTICATION (when required)								