**SHIPPING INSTRUCTIONS**

|  |  |
| --- | --- |
| 1. Shipper/Exporter (complete name and address):   |  C:\Documents and Settings\Administrator\Desktop\logo.png |
| 2. Tax ID, EIN or SNN (IRS) #:  | 5. Shipment Reference #:  |
| 3. Consignee (complete name and address)   |

|  |  |  |
| --- | --- | --- |
| Intermodal shipment: | [ ] Yes | [ ] No |
| Ship goods via: | [ ] Airfreight | [ ] Sea freight |
| Service level: | [ ] Direct | [ ] Consolidated |
| Freight charges to be: | [ ] Prepaid | [ ] Collect |
| Insurance required: 1.25% | [ ] Yes  | [ ] No |
| Hazardous materials:  | [ ] Yes  | [ ] No |

 |
| 4. Notify Party (complete name and address)   |
| 4. Bill to (complete name, address, bank, account#)   |
| 6. Place of receipt   | 8. Port of Discharge:  |
| 7. Port of Loading:   | 9. Place of Delivery  |
|  |  |
| **10 SCHEDULE B DESCRIPTION OF COMMODITIES**  |
| Marks and numbers11 | Schedule B Number (HS#)12 | Quantity and type of Package13 | Description of commodities14 | Gross weight (KGS/LBS)15 | Measurement (CBM/KGM)16 |
|                                     |                                     |                                     |                                     |                                     |                                     |
| **These commodities, technology, or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S. Law prohibited.** |
|  |  | **We have forwarded the above cargo to you:**Trucking company/Steamship line:      Tracking/PRO# :      ETD:       ETA:      **Please pickup Cargo at our location below:**Company:      Address:      Address:      Hours:       Tel:      Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| 16. I certify that all statements made and all information contained herein are true and correct and that I have read and understand theinstructions for preparation of this document, as set forth in the “Correct way to fill out the Shipper’s Export Declaration”. I understand that civiland criminal penalties, including forfeiture and sale, may be imposed for making false or fraudulent statements herein, failing to provide the equested 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 purposesauthorized by the Secretary of Commerce (13 U.S.C.310(g) |
| Title      | Export shipments are subject to inspection by U.S.Customs Service and/or office of Export Enforcement |
| Date      | 31. AUTHENTICAT ION (When required) |
| Telephone No. (Include Area Code)      | E-mail address      |

Note: The shipper or its authorized agent grants authority to KazTrans Limited Partnership in its name and on its behalf to act as forwarding agent for export control and customs purposes,

and to prepare, sign and/or accept any documents relating to this shipment and to forward this shipment in accordance with the terms, conditions, and limitations contained in the contracts

of carriage and/or tariffs of any other carriers employed in the transaction of this shipment. The shipper guarantees payment of all collect charges in the event consignee refuses payment.

 Herein under, the sole responsibility KazTrans Limited Partnership is to use reasonabl e care in the selection of carriers, forwarders, agents, and others to whom it may entrust the shipment.