

SHIPPERS LETTER OF INSTRUCTIONS

1a. EXPORTER (Name and address including Zip code) <div style="text-align: right; border: 1px solid black; padding: 2px;">Zip Code</div>		2. DATE OF EXPORTATION	3. TRANSPORTATION REFERENCE NO.		
b. USPPIS EIN (IRS) NO.		c. PARTIES TO TRANSACTION Related <input type="checkbox"/> Non-related <input type="checkbox"/>			
4a. ULTIMATE CONSIGNEE (complete name and address)		Shipper must check <input type="checkbox"/> Prepaid bill shipper <input type="checkbox"/> Collect Bill Consignee <input type="checkbox"/> Third party <input type="checkbox"/> Port to port <input type="checkbox"/> Door to port <input type="checkbox"/> Door to door <input type="checkbox"/> DAP <input type="checkbox"/> DDP			
b. INTERMEDIATE CONSIGNEE (complete name and address)		Ship via: <input type="checkbox"/> Air <input type="checkbox"/> Ocean Shipper request insurance No <input type="checkbox"/> Yes <input type="checkbox"/> \$			
5. FORWARDING AGENT H.Y.H. International Cargo Services, Inc. 9107 NW 105th Way Medley, FL. 33178 P:+1(305) 888 6400 F:+1(305) 883 0888 Email:export@hyh-cargo.com		6. POINT (STATE) OF ORIGIN	7. COUNTRY OF ULTIMATE DESTINATION		
8. LOADING PIER	9. MODE OF TRANSPORT (Specify)	14. CARRIER IDENTIFICATION CODE	15. SHIPMENT REFERENCE NO.		
10. EXPORTING CARRIER	11. PORT OF EXPORT	16. ENTRY NUMBER	17. HAZARDOUS MATERIALS <input type="checkbox"/> Yes <input type="checkbox"/> NO		
12. PORT OF UNLOADING (Vessel and air only)	13. CONTAINERIZED (Vessel only) <input type="checkbox"/> YES <input type="checkbox"/> NO	18. IN BOND CODE	19. ROUTED EXPORT TRANSACTION <input type="checkbox"/> Yes <input type="checkbox"/> NO		
20. SCHEDULE B NUMBER DESCRIPTION OF COMMODITIES (Use columns 22-24)					
D/F or M	SCHEDULE B NUMBER	QUANTITY-SCHEDULE B UNITS	SHIPPING WEIGHT (kilograms)	VIN/PRODUCT NUMBER/VEHICLE TITLE NUMBER	Value (U.S. dollars, no cents, selling price or cost if not sold)
21.	22.	23.	24.	25.	26.
27. LICENSE #/LICENSE EXCEPTION SYMBOL/AUTHORIZATION		28. ECCN (When required)			
29. Duly authorized officer or employee	The USPPI authorizes the forwarder named above to act as forwarding agent for export control and customs purposes.		<input type="checkbox"/> TOTAL NO OF PIECES <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> AIR <input type="checkbox"/> OCEAN <input type="checkbox"/> DIRECT <input type="checkbox"/> CONSOLIDATE		
30. 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, set forth in the "Correct Way to Fill Out the Shipper's Export Declaration." 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 authorized by the Secretary of Commerce (13 U.S.C. 301 (g)).		SPECIAL INSTRUCTIONS:		
Title	Export shipments are subject to inspection by U.S. Customs Service and/or Office of Export Enforcement.				
Date	31. AUTHENTICATION (When required)				
Telephone No (Include Area Code)	Email address				
NOTE: The Shipper or his Authorized Agent hereby authorizes the above named Company, in his name and on his behalf, to prepare any export documents, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the conditions of carriage and the tariffs of the carriers employed. The shipper guarantees payment of all collect charges in the event the consignee refuses payment. Hereunder the sole responsibility of the Company is to use reasonable care in the selection of carriers, forwarders, agents, and others to whom it may entrust the shipment.					