



“Around The World
Around The Clock”

3 Northway Lane
Latham, NY 12110

Tel: 518-785-6000
800-493-9444 / 24 hrs
Fax: 518-785-6239

Specific Instruction

If you are not familiar with the **Shipper’s Letter of Instruction** form, please read the definitions below to aid you in filling out the necessary fields.

1a. U.S. PRINCIPAL PARTY IN INTEREST (USPPI) – Provide the name and address of the U.S. exporter (U.S. principal party in interest). The USPPI is the person in the United States that receives the primary benefit, monetary or otherwise, of the export transaction. Generally, that person is the U.S. seller, manufacturer, order party, or foreign entity. The foreign entity must be listed as the USPPI if in the United States when the items are purchased or obtained for export. Report only the first five digits of the ZIP code.

1b. USPPI EIN (IRS) NO. or ID NO. –Enter the USPPI’s Internal Revenue Service Employer Identification Number (EIN) or Social Security Number (SSN) if no EIN has been assigned. Report the 9-digit numerical code as reported on your latest Employer’s Quarterly Federal Tax Return, Treasury form 941. The EIN is usually available from your accounting or payroll department. If an EIN or SSN is not available, a border crossing number, passport number, or a Customs identification number must be reported.

1c. PARTIES TO TRANSACTION – Indicate if this is a RELATED or NON-RELATED party transaction is a transaction between a USPPI and a foreign consignee, (e.g., parent company or sister company), where there is at least 10 percent ownership of each by the same U.S. or foreign person or business enterprise.

4a. ULTIMATE CONSIGNEE – Enter the name and address of the foreign party actually receiving the merchandise for the designated end-use or the party so designated on the export license. For overland shipments to Mexico, also include the Mexican state in the address.

4b. INTERMEDIATE CONSIGNEE –Enter the name and address of the party in a foreign country who makes delivery of the merchandise to the ultimate consignee or the party so named on the export license.

5a. FORWARDING AGENT –Enter the name and address of the forwarding or other agent authorized by a principal party in interest.

6. POINT OF ORIGIN OR FTZ NO. – If from a FTZ enter the FTZ number for exports leaving the FTZ, otherwise enter the: two-digit U.S. Postal Service abbreviation of the state in which the merchandise actually starts its journey to the port of export, or State of the commodity of the greatest value, or State of Consolidation.

7. COUNTRY OF ULTIMATE DESTINATION –Enter the country in which the merchandise is to be consumed, further processed, or manufactured; the final country of destination as known to the exporter at the time of shipment; or the country of ultimate destination as shown on the export license. Two-digit (alpha character) International Standards Organization (ISO) codes may also be used.

19. ROUTED EXPORT TRANSACTION – Check the appropriate “Yes” or “No” indicator that identifies the transaction as a routed export transaction. A routed export transaction is where the foreign principal party in interest authorizes a U.S. forwarding or other agent to export the merchandise out of the United States.

20. SCHEDULE B DESCRIPTION OF COMMODITIES – Use columns 22 -24 to enter the commercial description of the commodity being exported, its schedule B number, the quantity in schedule B units, and the shipping weight in kilograms. Enter a sufficient description of the commodity as to permit verification of the Schedule B Commodity Number or the commodity description as shown on the validated export license. Include marks, numbers, or other identification shown on the packages and the numbers and kinds of packages (boxes, barrels, baskets, etc).

21. D/F OR M – DOMESTIC EXPORTS (D): merchandise that is grown, produced, or manufactured in the United States (including imported merchandise which has been enhanced in value or changed from the form in which imported by further manufacture or processing in the United States). **FOREIGN EXPORTS (F):** merchandise that has entered the United States and is being re-exported in the same condition as when imported. **FOREIGN MILITARY SALES (M):** exports of merchandise that are sold under the foreign military sales program.

22. SCHEDULE B NUMBER – Enter the commercial description of the commodity being exported and the ten-digit commodity number as provided in Schedule B – Statistical Classification of Domestic and foreign Commodities Exported from the United States.

23. QUANTITY (SCHEDULE B UNITS) – Report whole unit(s) as specified in the Schedule B commodity classification code. Report also the unit specified on the export license if the units differ.

24. SHIPPING WEIGHT (kilograms) – (For vessel and air shipment only) Enter the gross shipping weight in kilograms or each Schedule B number, including the weight of containers but excluding carrier equipment. To determine kilograms use pounds (lbs) Multiplied by 0.4536 = kilograms (report whole units).

25. VIN/PRODUCT NUMBER/ VEHICLE NUMBER – (For used self-propelled vehicles only). Report the following items of information for used self-propelled vehicles as defined in Customs Regulations 19 CFR 192:1 (1) Report the unique Vehicle Identification Number (VIN) in the proper format; (2) Report the Product Identification Number (PIN) for those used self-propelled vehicles for which there are no VINs; and (3) the Vehicle Title Number.

26. VALUE (U.S. Dollars) – Enter the selling price or cost if not sold, including freight, insurance, and other charges to U.S. port of export, but excluding unconditional discounts and commissions (nearest whole dollar, omit cents). The value to be reported is the exporter’s (U.S.

principal party in interest) price or cost if not sold, to the foreign principal party in interest. Report one value for each Schedule B number.

27. LICENSE NO./LICENCE EXCEPTION SYMBOL/AUTHORIZATION –Whenever a Shipper’s Export Declaration (SED) or Automated Export System (AES) record is required: Enter the license number of the SED or AES record when you are exporting under the authority of a Department of Commerce, Bureau of Export Administration (BXA) license, a Department of State, Office of Defense Trade Controls (ODTC) license, a Department of the Treasury, Office of Foreign Assets Control (OFAC) license (enter either the general or specific OCAC license number), a Department of Justice, Drug Enforcement Agency (DEA) permit, or any other export license number issued by a Federal government agency. For the BXA license the expiration date of the license must be entered on the paper version of the SED only. Enter the **correct** License Exception symbol (e.g. LVS, GBS, CIV) on the SED or AES record when you are exporting under the authority of a License Exception. You may refer to the Export Administration Regulations (EAR). Enter the “No License Required” (NLR) designator when you are exporting items under the NLR provisions of the EAR. When the items being exported are subject to the EAR but not listed on the Commerce Control List (CCL) (i.e. items that are classified as EAR99); and When the items being exported are listed on the CCL but do not require a license.

28. EXPORT CONTROL CLASSIFICATION NUMBER (ECCN) – You must enter the **correct** Export Control Classification Number (ECCN) on record for all exports authorized under a license or License Exception, and items being exported under the “No License Required” (NLR) provisions of the EAR that are listed on the CCL and have a reason for control other than anti-terrorism (AT).

29. DULY AUTHORIZED OFFICER OR EMPLOYEE

Provide the signature of the exporter (U.S. principal party in interest) authorizing the named forwarding or agent to affect the export when such agent does not have a formal power of attorney or written authorization.

30. SIGNATURE/CERTIFICATION – Provide the signature of the exporter (U.S. principal party in interest) or authorized forwarding or other agent certifying the truth and accuracy of the information on the Shipper’s Export Declaration (SED) the title of exporter (U.S. principal party in interest) or authorized agent, the date of signature, the telephone number of the exporter (U.S. principal party in interest) or authorized agent preparing the SED and who can best answer questions for resolving problems on the SED, and the email address of the exporter (U.S. principal party in interest) or authorized agent.

“CHECK APPLICABLE BOX” AREA – Check applicable box. Freight Charges is required to fill out.

The form should be submitted to Trans-Border Global freight by email or fax.


If you have any questions, please call or fax us at the following numbers:

Trans-Border Global Freight Systems, Inc.

Trans-Border Global Freight Systems, Inc.

*** Import * Export * Air * Ocean * US Customs Brokerage * Domestic * 24 Hours A Day / 7 Days A Week *
No Size Or Weight Restrictions**

SHIPPER'S LETTER OF INSTRUCTIONS

1a. U.S. PRINCIPAL PARTY IN INTEREST (USPPI) (Complete Name and Address) ZIP CODE _____		 <p>Albany, NY 518-785-6000 518-785-6239 / fax</p> <p>Syracuse, NY 315-454-9585 315-454-9586 / fax</p>	
b. USPPI EIN (IRS) OR ID NO. _____	c. PARTIES TO TRANSACTION <input type="checkbox"/> Related <input type="checkbox"/> Non-Related		
4a. ULTIMATE CONSIGNEE TELEPHONE NO. _____		TERMS OF FREIGHT PAYMENT <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT	
b. INTERMEDIATE CONSIGNEE TELEPHONE NO. _____		TYPE OF SERVICE <input type="checkbox"/> AIR <input type="checkbox"/> OCEAN	
5. FORWARDING AGENT Trans-Border Global Freight Systems, Inc.		DATE _____	
DOCUMENTS ATTACHED: <input type="checkbox"/> COMMERCIAL INVOICE <input type="checkbox"/> PACKING LIST <input type="checkbox"/> LETTER OF CREDIT <input type="checkbox"/> BANK DRAFT <input type="checkbox"/> CERTIFICATE OF ORIGIN <input type="checkbox"/> DANGEROUS GOODS DEC.		DOES THIS SHIPMENT CONTAIN DANGEROUS GOODS? (ONE BOX MUST BE CHECKED) NO <input type="checkbox"/> YES <input type="checkbox"/>	
PREPARE: <input type="checkbox"/> CERTIFICATE OF ORIGIN <input type="checkbox"/> CONSULAR DOCUMENTATION <input type="checkbox"/> BANK DRAFT <input type="checkbox"/> LETTER OF CREDIT		6. POINT (STATE) OF ORIGIN OF FTZ NO. _____	
DECLARED VALUE FOR CARRIAGE \$ _____		7. COUNTRY OF ULTIMATE DESTINATION _____	
19. ROUTED EXPORT TRANSACTION Yes <input type="checkbox"/> No <input type="checkbox"/>		INTERNATIONAL SERVICE REQUESTED <input type="checkbox"/> INTERNATIONAL EXPRESS <input type="checkbox"/> DOOR TO DOOR <input type="checkbox"/> STANDARD AIRFREIGHT <input type="checkbox"/> DOOR TO AIRPORT <input type="checkbox"/> DOOR TO PORT	
SPECIAL INSTRUCTIONS _____		DUTY & TAXES <input type="checkbox"/> EXCLUSIVE <input type="checkbox"/> ALL INCLUSIVE	
Insurance Requested: <input type="checkbox"/> YES Amount \$ _____ <input type="checkbox"/> NO			

20. SCHEDULE B DESCRIPTION OF COMMODITIES, (Use columns 22-24)						VALUE (U.S. dollars, omit cents) (Selling price or cost if not sold)
NUMBER OF PIECES	D/F or M (21)	SCHEDULE B NUMBER (22)	QUANTITY - SCHEDULE B UNIT(S) (23)	SHIPPING WEIGHT (Kilos) (24)	VIN/PRODUCT NUMBER/VEHICLE TITLE NUMBER (25)	(26)

27. LICENSE NO./ LICENSE EXCEPTION SYMBOL/AUTHORIZATION _____	28. ECCN (When required) _____	Trans-Border GFS QUOTE NUMBER _____
29. Duly authorized officer or employee _____ The USPPI authorizes the forwarder named above to act as forwarding agent for export control and customs purpose		30. I certify that all statements 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' (available Bureau of Census, Wash. DC 20233). I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false or fraudulent statements herein, falling 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).
For tracking and tracing of shipment, please visit our web site at www.tbgs.com		

Cargo items tendered for air transportation are subject to aviation security controls by air carriers and when appropriate other government regulations. Copies of all relevant shipping documents showing all cargo's consignee, consignor, description, and other relevant data will be retained on file until the cargo completes its air transportation.	PICKED UP BY: _____ Condition (state exception) _____	Date _____ Time _____
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NOTE: The Shipper or his Authorized Agent hereby authorize Trans-Border GFS 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 Forwarding Agent and 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