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E-Shipper's Letter of Instruction

Please fill in the following details and fax to back to Transworld Logistics Group to expedite your shipment.

Shipper Ref: _____ Total no. of Containers: _____ Size 20'Std / OT 40'Std 40'HC / OT 45'HC (circle one)

Supplier Ref: _____

Position / Pick up Date: _____ Time requested: _____ AM / PM

Shipper Information

Exporter/: Company name: _____ Exporter's EIN (IRS) NUMBER: ___ - _____ or

Contact Person: _____ Social Security # for individual: ___ - ___ - ___ or

Address _____ Passport # _____ (Please attach copy)

City: _____ State / Province _____ Zip _____

Tel: _____ Fax: _____ E-mail: _____

Loading Address (if different from above)

Name: _____

Address _____

City: _____ State / Province _____ Zip _____

Tel: _____ Fax: _____ E-mail: _____

Consignee

Ultimate Consignee: _____

Contact Person: _____

Address _____

Address _____

City: _____ State / Province _____ Zip _____ Country: _____

Tel: _____ Fax: _____ E-mail: _____

Shipment Details:

Description

Commodity: _____ (If Hazardous IMO / MSDS required)

No. of pieces _____ Weight: _____ Lbs / Kgs (circle one)

Declared Value for Customs: \$ _____ Dimensions _____

Insurance Required No / Yes (circle one) Amount \$ _____

Prepaid / Collect (circle one) Terms of Sale: Ex-Works / FOB _____ point / FCR _____ / DDU / DDP

Open Account _____ Letter Of Credit

For Internal Use

TLG Ref: _____ Container no. _____ Seal No. _____ ETS _____ ETA _____ Gateway: _____