

Quote request date: _____

Quote Request Form

Shipper _____
 Address _____
 Address _____
 City _____ State/Zip/Country _____

Consignee _____
 Address _____
 Address _____
 City _____ State/Zip/Country _____

SERVICE MODE _____ HAZMAT? _____
 IF OCEAN - SERVICE _____ LICENSED CARGO? _____
 FCL CONTAINER SIZE _____ IF LICENSED, PROVIDE EXPORT LICENSE NO _____
 SERVICE TYPE _____
 SERVICE TERMS _____ LICENSE TYPE, IF LICENSED _____
 INCO TERMS _____
 SPECIALIZED EQUIPMENT _____
 CUSTOMS CLEARANCE REQUIRED? _____ HTS CODE _____

COMMERCIAL VALUE _____ INSURANCE REQUIRED? _____

COMMODITY _____

TOTAL PIECES _____ TOTAL WEIGHT _____ LBS OR KG _____

DIMENSIONS

QUANTITY	PACKAGE TYPE	DIMENSIONS	IN OR CM
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SPECIAL REQUESTS
Any special requirements
or additional information