

SHIPPER'S LETTER OF INSTRUCTIONS



Nippon Express USA, Inc
FMC License No. 1087F

1a. U.S. Principal Party in interest (USPPI) (Complete name and address) Name _____ Address _____ Person in charge _____ Tel: _____ e-mail address _____ ZIP CODE _____		
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1b USPPI EIN (IRS) No. or ID No.	1c. Parties to Transaction <input type="checkbox"/> RELATED <input type="checkbox"/> NON RELATED	2. Date of Exportation	3. Shipper's Reference No.
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4a Ultimate Consignee (Complete name and address) Name _____ Address _____ Person in charge _____ Tel: _____ e-mail address _____ 4b. Notify party (Complete name and address) Name _____ Address _____ Person in charge _____ Tel: _____ e-mail address _____ 5a Forwarding Agent (Complete name and address) (If not NEU) _____ 5b Forwarding Agent's EIN (IRS) No. or FMC No. _____	<p style="text-align: center;">Check Applicable box</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Insurance</td> <td style="width: 33%;"><input type="checkbox"/> YES</td> <td style="width: 33%;"><input type="checkbox"/> NO</td> </tr> <tr> <td>Freight Charges</td> <td><input type="checkbox"/> PREPAID</td> <td><input type="checkbox"/> COLLECT</td> </tr> <tr> <td>Quotation Number</td> <td colspan="2">No. _____</td> </tr> <tr> <td>Type of B/L</td> <td><input type="checkbox"/> WAYBILL</td> <td><input type="checkbox"/> ORG. B/L</td> </tr> <tr> <td>Refer container</td> <td><input type="checkbox"/> YES</td> <td><input type="checkbox"/> NO</td> </tr> <tr> <td colspan="3" style="text-align: center;">(If Yes: _____ degree)</td> </tr> </table>	Insurance	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Freight Charges	<input type="checkbox"/> PREPAID	<input type="checkbox"/> COLLECT	Quotation Number	No. _____		Type of B/L	<input type="checkbox"/> WAYBILL	<input type="checkbox"/> ORG. B/L	Refer container	<input type="checkbox"/> YES	<input type="checkbox"/> NO	(If Yes: _____ degree)		
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(If Yes: _____ degree)																			

6. Terms of Sales <input type="checkbox"/> EXW <input type="checkbox"/> FOB <input type="checkbox"/> CFR <input type="checkbox"/> CIF <input type="checkbox"/> DDU <input type="checkbox"/> DDP <input type="checkbox"/> Others _____	7. Country of Ultimate Destination _____
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8. Place of receipt	9. Port of Loading	14. Name of Vessel	15. Booking #
10. Exporting Carrier	11. Port of Export	16. via FCL or LCL or others <input type="checkbox"/> FCL <input type="checkbox"/> BB <input type="checkbox"/> LCL	17. Hazardous Materials <input type="checkbox"/> YES <input type="checkbox"/> NO
12. Port of Discharge	13. Place of delivery	18. No. & Type of container if FCL <input type="checkbox"/> 20' x <input type="checkbox"/> 40'(96) x <input type="checkbox"/> 40' x	19. Terms of Payment <input type="checkbox"/> T/T <input type="checkbox"/> L/C <input type="checkbox"/> NO COMMERCIAL VALUE

20. Schedule B Description of Commodities (Use Columns 22-24)

D/F or M (21)	Schedule B Number (22)	Quantity Schedule B units (S) (23)	Shipping Weight (KG) (24)	Vin/Products Number/ Vehicle Title Number (25)	Value (U.S. Dollars, omit cents) (Selling Price or cost if not sold) (26)
http://www.census.gov/foreign-trade/schedules/b/#search					

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

27. LICENSE NO. / LICENSE EXCEPTION SYMBOL / AUTHORIZATION _____	28. ECCN (When required) _____	<p style="text-align: center;">IMPORTANT HANDLING INSTRUCTION</p> <p style="text-align: center;">SPECIAL HANDLING REQUIRED AS INDICATED</p> <input type="checkbox"/> Time Sensitive shipment Need to be delivered to the consignee by DATE: _____
29. DULY AUTHORIZED OFFICER OR EMPLOYEE _____ The USPFI authorized the forwarder named above to act as forwarding agent for export control and customs purposes.		
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).		
Shipper or Exporter's Signature _____ Title: Name: _____	The undersigned hereby authorizes NIPPON EXPRESS U.S.A., INC. to act as forwarding agent for export control and customs purposes.	
Date _____	Tel.# _____	E-mail address _____
31. AUTHENTICATION (When required) _____		

PLEASE SIGN THE FIRST EXPORT DECLARATION IN BOX 29 WITH PEN AND INK

NOTE: The Shipper or its Authorized Agent grants authority to NIPPON EXPRESS USA, INC. in its name and on its behalf, to act as its 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 transportation of this shipment. The shipper guarantees payment of all collect charges in the event the consignee refuses payment. Hereinunder, the sole responsibility of NIPPON EXPRESS USA, INC. is to use reasonable care in the selection of carriers, forwarders, agents and others to whom it may entrust the shipment.

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