

SHIPPING INSTRUCTIONS

PHONE #

PLEASE CALL IF YOU HAVE ANY QUESTIONS CONCERNING THIS FORM. IF YOU DO NOT HAVE AN ACCOUNT, PAYMENT MUST BE SENT IMMEDIATELY. Payments not made from any customer within 30 days are subject to collections fees per Tariff Item 370 (available upon request) (which include 1.5% service charge and up to 50% collection agency fees)

ATTENTION SHIPPER

DUE TO PREVIOUS PROBLEMS: THE SHIPPING INSTRUCTION AND THE PACKING LIST FORMS MUST BE COMPLETELY FILLED OUT, OR YOUR SHIPMENT DOES NOT MOVE.

ALL LOCAL DELIVERY CUSTOMS CLEARING, DUTIES, AND PORT CHARGES ARE PAYABLE BY YOU AT DESTINATION; DEPENDING ON THE COUNTRY. EXCEPTION: ONLY IF YOU HAVE AN ACCOUNT WITH US, WE RECOMMEND AN AGENT. YOUR BOARD PAYS THIS IN THE U.S. AFTER YOUR SHIPMENT HAS BEEN DELIVERED FOR THE EARLIEST RELEASE.

A RECOMMENDED AGENT, IS ONLY THAT; A RECOMMENDED AGENT. THEY ARE NOT PART OF OUR COMPANY BUT AN AGENT WHO IS PART OF A GROUP THAT ASSISTS EACH OTHER ON INTERNATIONAL MOVES. WE DO NOT GUARANTEE THEM OR THEIR ESTIMATES (AS CUSTOM POLICIES ARE ALWAYS CHANGING). **Only check one if Straightway is custom clear/delivering:

☐ Yes, have Straightway bill my Mission Board/Company so shipment is released.
☐ No, consignee will take total responsibility for payment.

I AGREE TO CONTACT THE CONSULATE FOR THE COUNTRY I AM SHIPPING TO FOR REGULATIONS ON SHIPPING IMPORTS INTO THEIR COUNTRY. STRAIGHTWAY IS NOT RESPONSIBLE FOR ANYTHING BEYOND THE PORT OF DESTINATION.

ALL WOODEN CRATES OR WOODEN PALLETS MUST BE CERTIFIED, FUMIGATED BEFORE SHIPPED. CONTACT THE TERMINAL OF DEPARTURE FOR A COMPANY NEAR YOU.

*****PLEASE NOTE: WE CAN NOT HANDLE HAZARDOUS MATERIALS; E.G.: BATTERIES OF ANY SIZE, AEROSOL SPRAY CANS, FLAMMABLE LIQUIDS, 3-1 OIL, NAIL POLISH REMOVER, ALCOHOL AND EMPTY PROPANE TANKS. PLEASE CHECK THE ENCLOSED LIST OR WITH US WHEN IN DOUBT.**

IF YOU WANT INSURANCE FOR YOUR HOUSEHOLD GOODS, PLEASE READ ENCLOSED INFORMATION ON THE RULES TO FOLLOW, ETC. **THERE IS A \$500 DEDUCTIBLE ON ALL INSURANCE POLICIES.**

PLEASE SIGN AND FAX BACK TO STRAIGHTWAY TO SAY YOU HAVE READ AND UNDERSTOOD THIS.

THANK YOU,
STRAIGHTWAY INC

SHIPPER'S SIGNATURE _____ DATE _____

INVOICE/PACKING LIST

SHIPPER		CONSIGNEE		CONTACT US
ADDRESS		ADDRESS		
FEDERAL ID#				
NUMBER OF CRATE/ DRUM/BOX	DESCRIPTION OF CONTENTS	N=NEW U=USED	CUSTOMS VALUE	INSURANCE VALUE

IDENTIFIABLE MARKS ON CRATES/DRUMS/BOXES

Signature: _____
