

FORWARDER:	
FREIGHT TERMS CONDITIONS: EXW / FOB	

POL:	
T/S:	
POD:	

VESSEL:	to fill by POL
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EQUIPMENT:	
COMMODITY:	
WEIGHT:	

LOADING ADDRESS:	
DAY/TIME OF STUFFING:	to fill by POL
LOADING REFERENCE:	to fill by POL
CONTACT:	

CONTRACT NUMBER:	
TRANSPORT TARIFF (IF SPECIAL)	

CUSTOMS: CMA / OTHERS (Company?)	
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Type of doc: WAYBILL / ORIGINAL	
PLACE OF ISSUE OF BL	
BL DRAFT TO BE SENT TO (Mail address):	
ADDITIONAL COMMENTS:	