

FCL Booking Confirmation

Date: _____

Booking Reference No: _____

SHIPPER DETAILS

Shipper Name _____
Address _____
Contact Person _____
Phone / Email _____

CONSIGNEE DETAILS

Consignee Name _____
Address _____
Contact Person _____
Phone / Email _____

SHIPMENT INFORMATION

Port of Loading _____
Port of Discharge _____
Place of Receipt _____
Final Destination _____
Estimated Departure _____
Estimated Arrival _____
Shipping Line _____
Vessel / Voyage _____

CONTAINER & CARGO DETAILS

Container Size/Type _____
No. of Containers _____
Cargo Description _____
Gross Weight _____
Volume (CBM) _____
HS Code _____

REMARKS

Shipper's Signature

Date: _____

Booking Agent

Date: _____

Carrier's Representative

Date: _____