

Perishable Goods Multimodal Freight Forwarding Instruction

1. SHIPPER INFORMATION

Company Name: _____

Address: _____

Contact Person: _____

Telephone/Email: _____

2. CONSIGNEE INFORMATION

Company Name: _____

Address: _____

Contact Person: _____

Telephone/Email: _____

3. CARGO DETAILS

Description of Goods	HS Code	Packing	No. of Packages	Weight (kg)	Volume (m³)	Temperature Requirement

4. TRANSPORT MODES & ROUTING

Modalities (e.g., sea, air, road, rail): _____

Place of Receipt: _____

Place of Delivery: _____

Requested Routing/Transit Points: _____

5. SPECIAL HANDLING INSTRUCTIONS

6. DOCUMENTS PROVIDED

(Tick applicable)

<input type="checkbox"/> Commercial Invoice	<input type="checkbox"/> Packing List
<input type="checkbox"/> Certificate of Origin	<input type="checkbox"/> Phytosanitary/Health Certificate
<input type="checkbox"/> Other (Specify): _____	

7. INSURANCE

Is insurance required? ☐ Yes ☐ No

If yes, amount:

8. DECLARATION & AUTHORIZATION

I hereby instruct the forwarder to arrange shipment as specified above and declare that all information is correct to the best of my knowledge.

Name:

Signature:

Date:
