

International Quote Form

Sales Executive: Date:
 Customer Name: Phone:
 Contact Name: Email:

Requested Pickup Date: Requested Delivery Date:

ORIGIN ADDRESS/AIRPORT/PORT:

DESTINATION ADDRESS/AIRPORT/PORT:

Please choose preferred mode(s) of transport below.

Intl Air Service: Expedite ☐ Standard ☐

Intl Ocean Service: 20' ☐ 40' ☐ 40H' ☐ LCL ☐

Drayage: Live ☐ Drop & pull ☐ Port ☐ Ramp ☐

20' ☐ 40' ☐ 40H' ☐ Port/Ramp Name

Overweight? Yes ☐ No ☐

Canada or Mexico: FTL ☐ LTL ☐ Customs broker needed? YES ☐ NO ☐

Piece count/type: Total weight:

Dims: L W H Wgt L W H Wgt

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Description of Commodity:

Hazardous: NO ☐ YES ☐ UN Number:

Shipment Terms:

EXW ☐ FCA ☐ FAS ☐ FOB ☐ CFR ☐ CIF ☐ CPT ☐ CIP ☐ DAT ☐ DAP ☐ DDP ☐

Declared Value Protection: NO ☒ YES ☐ Declared Value Amount \$

Additional information: