NORAL CARGO INTERNATIONAL, INC.

CLICK HERE TO SUBMIT FORM

7500 NW 25 ST, Suite 7
Miami, FL 33122
Phone: 305-591-2898
Fax: 305-591-0437
Email: noralcargo@noralcargo.com

SHIPPERS LETTER OF INSTRUCTION

SHIPPER: PLEASE BE SURE TO COMPLETE ALL SHADED AREAS.

SHIPPER MUST CHECK: ☐ PREPAID ☐ COLLECT ☐ C.O.D $

1a. U.S PRINCIPAL PARTY INTEREST (USPPI) (Complete Name and Address)	2. USPPI EIN (IRS) NO. ID NO.	3. PARTIES TO TRANSACTION ☐ Related ☐ Non-related
4a. ULTIMATE CONSIGNEE (Complete name and address)	4b. INTERMEDIATE CONSIGNEE (Complete name and address)	
5. FORWARDING AGENT (Complete name and address)	6. POINT (STATE) OF ORGIN FTZ NO.	7. COUNTRY OF ULTIMATE DEST

8. LOADING PIER	9. METHOD OF TRANSPORTATION	10. CARRIER IDENTIFICATION CODE	11. SHIPMENT REFERENCE NUMBER
12. EXPORTING CARRIER	13. PORT OF EXPORT	14. ENTRY NUMBER	15. HAZARDOUS MATERIAL ☐ YES ☐ NO
16. PORT OF UNLOADING	17. CONTAINERIZED (Vessel Only) ☐ YES ☐ NO	18. IN BOND NUMBER	19. ROUTED EXPORT TRANSPORT ☐ YES ☐ NO
SHIPPERS REFERENCE ONLY	DATE:	SHIP VIA ☐ AIR ☐ OCEAN	☐ CONSOLIDATE ☐ DIRECT

SHIPPERS NOTE: IF YOU ARE UNCERTAIN OF THE SCHEDULE B COMMODITY CODE, DO NOT TYPE IT IN, WE WILL COMPLETE WHEN PROCESSING THE 7525

SCHEDULE B DESCRIPTION OF COMMODITIES				VIN/ PRODCUT NUMBER/ VEHICLE TITLE NUMBER	VALUE (U.S. Dollars, omit cents) (Selling price of cost if not sold)
D/F Or M	SCHEDULE B NUMBER	QUANITY SCHEDULE B UNITS	SHIPPING WEIGHT (Kilograms)		

27. LICENSE NO. /LICENSE EXCEPTION SYMBOL /AUTHORIZATION	28. ECCN (When required)	DOCUMENTS ENCLOSED / SPECIAL INSTRUCTIONS

SHIPPER REQUEST INSURANCE ☐ NO ☐ YES $

WE (THE SHIPPER) HAVE FORWARDED TO YOU THE SHIPMENT DESCRIBED ABOVE VIA: ☐ YOUR TRUCK ☐ OTHER:

CARRIER: PRO#

SHIPPER'S INSTRUCTION IN CASE OF INABILITY TO DELVIER CONSIGNMENT AS ASSIGNED

☐ ABANDONMENT ☐ RETURN TO SHIPPER ☐ DELIVER TO:

NAME:	DATE:	SIGNATURE: