


<b>S/O NR.</b>				<b>Shipping Order Form</b> <b>SUI JUN INTERNATIONAL LTD.</b> (hereinafter referred to as "the Company") Unit 808, 8/F, Tower B, Manulife Financial Centre, 223-231 Wai Yip St., Kwun Tong, Kolwoon, HK. Website : <a href="http://www.suijun.com">http://www.suijun.com</a> TEL : 25443963 FAX: 25443692 E-mail: <a href="mailto:sjbooking@suijun.com">sjbooking@suijun.com</a>		
Shipper (Full Name & Address)						
USCI#:		Service mode		Incoterms		
Contact:		Haulage by		Pick up address (if required)		
Tel:		VGM declaration				
Fax:						
Email:						
Consignee (If "To Order" state Notify Party)		For FCL, pls specify nr. of container		Contact nr. Contact Person		
		<input type="checkbox"/> 20'GP <input type="checkbox"/> 40'HQ <input type="checkbox"/> 40'GP <input type="checkbox"/> 45'HQ				
VAT ID#:		Others :		Ocean Freight		
Contact:		Document Required		Local Charges		
Fax:		<input type="checkbox"/> Telex Release <input type="checkbox"/> Sea Waybill <input type="checkbox"/> Original B/L <input type="checkbox"/> Cargo Receipt <input type="checkbox"/> Switch B/L <input type="checkbox"/> Ocean B/L		If payable by Third party, pls specify name of company and contact details.		
Notify Party				Contact nr. Contact Person		
Contact:						
Tel:						
Intended Vessel		Place of Receipt		Insurance Required		
				Export License Required		
Port of Loading		Port of Discharge		Dangerous Goods Declaration		
				<input type="checkbox"/> The goods or any part thereof contain batteries? <input type="checkbox"/> Dry Batteries <input type="checkbox"/> Lithium Batteries <input type="checkbox"/> Others :		
		Place of Delivery				
BELOW PARTICULARS OF GOODS DECLARED BY SHIPPER, AND ARE UNKNOWN TO THE COMPANY						
Marks & Numbers	Packages		Description of goods	H.S. Code	Gross Weight KG	Measurement CBM
	NOP	Type				
			PO# Cargo Ready Date:			
The Company received the goods or the containers or the packages said to contains the goods as specified herein for the custody and carriage of the said goods or the said containers or packages in accordance with the terms and conditions of the Carriers regular form of Bill of Lading which shall be deemed to be incorporated herein. Neither carrier nor the Company are responsible for cargo being shut out or offloaded or consequence arising therefrom.			Warehouse address (For LCL)		Shipper's Signature and Company Stamp	
For and on behalf of SUI JUN INTERNATIONAL LTD. acknowledge receipt of the Shipper's booking.			CFS Closing : _____ ETD : _____ ETA : _____			

All transactions are subject to the Company's Standard Trading Conditions (copy is available upon request) which in certain circumstances limit or exempt the Company's liability.