



10+2 Information Form

Seller Name & Address:

Manufacturer Name/MID:

Buyer Name & Address:

Ship To Name & Address:

Bond Holder:

Vessel & Voyage Number: _____

Port of Loading: _____

Date & Time of Departure: _____

Port of Unloading: _____

Consolidator Name & Address:

Container Stuffing Name & Address:

Importer of Record Name & Address:

IRS#- _____

Consignee Name & Address:

IRS#- _____

Forwarding Agent Name:

Container Number: _____

Container Size: _____

Date & Time of Arrival: _____

Containerized? _____

Part Number:

HTS#

Quantity:

Description of Commodities:

Country of Origin:

Part Number:	HTS#	Quantity:	Description of Commodities:	Country of Origin: