

**PAVE LOGISTICS AND TRADING PLC**

CHURCHIL ROAD TRACON TOWER 2ND FLOOR ROOM NO. 03-10, 03-11, ADDIS ABEBA, ETHIOPIA

CONTACT DETAIL-TEL: 00251-111-262622

Web: [www.pave-logistics.com](http://www.pave-logistics.com)Email: [pave@pave-logistics.com](mailto:pave@pave-logistics.com)**EXPORT Shipping Instruction**

Shipper (complete name and address) *:		BOOKING /FLIGHT NUMBER	
		<b>Bill Type* (Please select one)</b> <input type="checkbox"/> Shipped Bill / Original <input type="checkbox"/> Seaway Bill <input type="checkbox"/> Airway Bill <input type="checkbox"/> Combined <input type="checkbox"/> Split	
Consignee (complete name and address)*:		<b>DECLARATION OF DANGEROUS GOODS</b> PLEASE ATTEST WHETHER YOUR CARGO IS DANGEROUS OR NOT. (MARK YES/NO) <input type="checkbox"/> YES <input type="checkbox"/> NO  -> IF YOUR CARGO IS DANGEROUS CARGO, PLEASE MARK THE IMO-DGR CLASS THAT APPLIES TO YOUR CARGO -> FOR DANGEROUS CARGOES, PLEASE ATTACH THE NECESSARY DOCUMENTS FOR CAREFULL HANDLING. -> FOR CLASS 7 CARGO WHICH NEEDS TO BE IMPORTED/EXPORTED THROUGH THE PORT OF DJIBOUTI, PLEASE ATTACH YOUR PERMISSION CERTIFICATE FROM THE DJIBOUTI GOVERNEMENT AND THE PORT AUTHORITY.	
Notify party (complete name and address)*:		<b>IMO-DGR CLASS</b> <input type="checkbox"/> CLASS 1 <input type="checkbox"/> CLASS 6 <input type="checkbox"/> CLASS 2 <input type="checkbox"/> CLASS 7 <input type="checkbox"/> CLASS 3 <input type="checkbox"/> CLASS 8 <input type="checkbox"/> CLASS 4 <input type="checkbox"/> CLASS 9 <input type="checkbox"/> CLASS 5	
Place of issue of B/L*:		Payment Term (Prepaid or Collect)*:	
Vessel/LINER*:		Voyage/Flight Number*:	
Place/Port of loading*:		Port of discharge*:	
		Place of delivery (Only mandatory in case you are looking for door to door delivery)*: <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>Particulars as furnished by shipper on SLAC basis – Carrier not responsible</b>			
Kind of Packages*; Description of Goods*; Marks & Numbers.*		<b>VGM (VARIFIED GROSS MASS)**</b>	
		METHOD 1	
		METHOD 2	
		Vessel ETA	
		Vessel ETA	
		CFS Cut-off	
		Terminal Cut-off	
Container No* (if container)	Seal No.* (If container)	Gross Weight * (KGS)	Measurement * (CBM)
1			
2			
3			
4			
5			
6			
7			
8			
<b>Freight Components :</b>		(Please select one)*	
	Prepaid	Collect	To be paid by:
Ocean Freight	<input type="checkbox"/>	<input type="checkbox"/>	
Origin Local Charges	<input type="checkbox"/>	<input type="checkbox"/>	
Destination Local Charges	<input type="checkbox"/>	<input type="checkbox"/>	
<b>**Method 1:</b> requires only the TOTAL VGM to be entered on the table			
<b>Method 2:</b> The shipper or a third party may weigh all packages and cargo items, including the mass of pallets, dunnage, and other packing materials securing the cargo to be packed in the container, and add the tare mass of the container to the sum of the single masses of the container's contents.			
<b>REMARKS</b> (Please fill any remark that needs to be taken into consideration for loading purpose)			