

FORWARDER LETTER OF INSTRUCTION

FORWARDER INFORMATION:

Company:
Contact Name:
Address:
City, State, Zip
Phone:
Email:

Billing Reference #



501 Eastern Ave.
Bensenville, IL 60106
(630) 595-7510

**THE FOLLOWING INFORMATION MUST BE PROVIDED WITH EACH SHIPMENT TENDERED.
MISSING INFORMATION OR AN INCOMPLETE LETTER OF INSTRUCTION WILL RESULT IN A DELAY OF
PROCESSING. INFORMATION MAY BE SUBMITTED ON THIS FORM OR ON A SEPARATE PIECE OF PAPER**

FULL NAME & ADDRESS OF THE SHIPPER

FULL NAME AND ADDRESS OF CONSIGNEE

SHIPPERS 24 HOUR EMERGENCY NUMBER

AGENCY

CUSTOMER # / CONTRACT #

R.A.S., TO SUPPLY 24 HOUR EMERGENCY # (additional fees apply) YES NO

**A CURRENT SDS IS REQUIRED FOR EACH PRODUCT TENDERED
DUE TO VARIOUS AIRLINE LIMITATION IF THE BELOW INFORMATION IS NOT PROVIDED, AND FREIGHT IS
REFUSED BY THE CARRIER WE CAN NOT BE RESPONSIBLE FOR ADDITIONAL CHARGES.**

☐ Air Freight ☐ Ocean Freight ☐ Over Pack (if allowed)

☐ Pack For Passenger Aircraft ☐ Pack For Cargo Aircraft Only

Do You Require A New Declaration : YES NO Do you require a quote before processing : YES NO

Air Carrier (if left blank, see above) :

Were you quoted on this shipment? If so, please provide copy of quote or quote number:

Will R.A.S. arrange the transfer/delivery once freight is processed ☐ Yes ☐ No

If R.A.S., is arranging transfer/delivery, please provide location, address, lock out, cut off and booking number if applicable.

Delivery To

Address

Cut Off/Lock Out

Booking Number