



Shipping Instruction Form

UK Global Logistics Ltd

Your Freight, Our Care

SHIPPER	
Name Company / Individual	
Address	
Street	
City/State	
Post/Zip Code	
Email	
Tel	
EORI No.	

CONSIGNEE	
Name Company / Individual	
Address	
Street	
City/State	
Post/Zip Code	
Email	
Tel	
TAX ID / VAT	

NOTIFY PARTY (If not Same as Consignee)	
Name Company / Individual	
Address	
Street	
City/State	
Post/Zip Code	
Email	
Tel	
TAX ID / VAT	

PORT OF LOADING	
Vessel Name	
Voyage No	

PORT OF DISCHARGE

PLACE OF DELIVERY

GOODS DESCRIPTION	
No of Units	
New/Used	
Car Make	
Car Model	
Chassis No	
Engine No	
Colour	
YOM	
HS Code	
Other Info	

CONTAINER DETAILS	
Container No	
Seal No	
VGM	

Customer Signature

Print Name

Date