


SHIPPER'S LETTER OF INSTRUCTIONS (SLI)

1. USPPI Name:		3. Freight Location Company Name:		5. Forwarding Agent:					
<input type="text"/>		<input type="text"/>		 BLUE DRACO GLOBAL LOGISTICS CORP. 3409 NW 72th Avenue Suite A, Miami FL33122					
2. USPPI Address Including Zip Code:		4. Freight Location Address (if not box #2):							
<input type="text"/>		<input type="text"/>							
6. USPPI EIN (IRS) No:		7. Related Party Indicator (select one):		Air Freight					
<input type="text"/>		<input type="checkbox"/> Direct Consumer <input type="checkbox"/> Government Entity <input type="checkbox"/> Reseller <input type="checkbox"/> Other/Unknown		Ocean Freight Yes <input type="checkbox"/> No <input type="checkbox"/>					
8. USPPI		9. Routed Export Transaction (select one):		Yes <input type="checkbox"/> No <input type="checkbox"/>					
10. Ultimate Consignee Name & Address:		11. Ultimate Consignee Type (select one):		12. Intermediate Consignee Name & Address:					
<input type="text"/>		<input type="checkbox"/> Direct Consumer <input type="checkbox"/> Government Entity <input type="checkbox"/> Reseller <input type="checkbox"/> Other/Unknown		<input type="text"/>					
<input type="text"/>				<input type="text"/>					
<input type="text"/>				<input type="text"/>					
<input type="text"/>				<input type="text"/>					
13. Are any of the goods intended for "Military End Use" or to a "Military End User" in the countries listed in 15 CFR 744.21(a). Refer to 15 CFR744.21(f) and (g) for definitions of Military End Use" and "Military End User". Yes <input type="checkbox"/> No <input type="checkbox"/>									
14. State of Origin:		17. In-Bond Code:		20. TIB / Carnet?					
<input type="text"/>		<input type="text"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>					
15. Country of Ultimate Destination:		18. Entry Number:		Yes <input type="checkbox"/> No <input type="checkbox"/>					
<input type="text"/>		<input type="text"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>					
16. Hazardous Material:		19. FTZ Identifier:		Yes <input type="checkbox"/> No <input type="checkbox"/>					
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="text"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>					
21. INSTRUCTIONS TO FORWARDER:									
<input type="text"/>									
22. Are there any items that require additional Partner Government Agency (PGA) reporting as in Appendix Q and Appendix X? Yes <input type="checkbox"/> No <input type="checkbox"/>									
23. Gross Weight (kilos)		24. SOLAS Certification		By checking the Box 24 certification, I am certifying that the full shipment weight shown in box 23 is the Certified Gross Weight which may be added to the container tare weight and used as the Verified Gross Mass (VGM) under the Method 2 of the SOLAS VGM regulation dated July 1, 2016.					
<input type="text"/>		<input type="checkbox"/>							
25. Domestic or Foreign (D/F)	26. Schedule B / HTS Number and Commercial Commodity Description <small>For Vehicles: VIN/Year, Make, Model and Vehicle Title Number are required</small>	27. Quantity in Schedule B / HTS Units	28. DDTC Quantity and DDTC Unit of Measure	29. Shipping Weight (in Kilos)	30. ECCN, EAR99 or USML Category No.	31. S M E (Y/ N)	32. Export License No., License Exception Symbol, DDTC Exemption No., DDTC ACM No. or NLR	33. Value at the Port of Export (US Dollars)	34. License Value by item (if applicable) (US Dollars)
D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Y	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
35. DDTC Applicant Registration Number:		36. Eligible Party Certification:		Yes <input type="checkbox"/> No <input type="checkbox"/>					
<input type="text"/>		<input type="text"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>					
Check here if the USPPI authorizes the above named forwarder to act as its true and lawful agent for purposes of preparing and filing the Electronic Export Information ("EEI") in accordance with the laws and regulations of the United States. It does not authorize the forwarder to determine license authority or obtain licenses under EAR 758.3(b) or any other licensing agency. <input type="checkbox"/>									
38. <input type="checkbox"/> certify that the statements made and all information contained herein are true and correct. I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false and fraudulent statements herein., failing to provide the requested information or for violation of U.S. laws on exportation (13 U.S.C. Sec . 305: 22 U.S.C. Sec. 401, 18 U.S.C. Sec 1001, 50 U.S.C. app. 2410).									
39. USPPI Email Address:		40. USPPI Telephone No.:		<input type="text"/>					
<input type="text"/>		<input type="text"/>		<input type="text"/>					
41. Printed Name of the Duly authorized officer or employee:									
<input type="text"/>									
42. Signature:		43. Title:		44. Date:					
<input type="text"/>		<input type="text"/>		<input type="text"/>					