**SHIPPING INSTRUCTIONS: EXPO 57869**

1. **Company name: NIBIRU LLC**
2. **Set point temperature of containers must be: -24° C**
3. **Contract number Maersk/Hamburg Sud (in case you have one):**
4. **Description of goods: ILLEX ARGENTINUS SQUID WHOLE ROUND (ILLEX ARGENTINUS)**

**NCM:**

1. **Maximum allowed net weight: 27,000 kg / per container**
2. **Maximum allowed Gross Weight: 28,000 kg / per container**
3. **NUMBER OF SETS and DOCUMENTS REQUIRED:**

**Please specify: 1 set of documents per operation (not per container)**

**Please let us know the document you need (tick it below or erase the one you don´t need)**

**Bill of Lading: Telex Release**

**Cert. of Origin: (1 ORIGINAL + 3 COPIES)**

**Health Certificate: (1 ORIGINAL + 3 COPIES)**

**Packing List: (1 ORIGINAL + 3 COPIES)**

**Commercial Invoice: (1 ORIGINAL + 3 COPIES)**

**Catch Certificate (1 ORIGINAL)**

**Need to have Official Weight Sheet ( Weight Tickets ) VGM**

1. **Please specify:**

* **FREIGHT PREPAID OR COLLECT. PREPAID**
* **Who pays the freight? NIBIRU LLC**

1. **Bl release: ORIGINALS OR TELEX RELEASE.**

**TELEX RELEASE**

**Please specify: COMPLETE ADDRESS, PHONE, CONTACT PERSON, EMAIL (and USCI CODE for China shipments):**

1. **Bill of Lading**

**Consignee B/L:**

**MASTER OF F/V “NO.7 CHOKYU MARU”**

**C/O Serex Maritimos, SL**

**B35496496**

**C/SAO, Paulo 4, Nave 7,**

**35008 EL Sebadal, Las Palmas**

**De Gran Canaria, Spain**

**TEL : 928338248 FAX: 928468642**

**EMAIL:** [**administracion@serexmaritimos.com**](mailto:administracion@serexmaritimos.com)

**Notify B/L :**

**MASTER OF F/V “NO.7 CHOKYU MARU”**

**C/O Serex Maritimos, SL**

**B35496496**

**C/SAO, Paulo 4, Nave 7,**

**35008 EL Sebadal, Las Palmas**

**De Gran Canaria, Spain**

**TEL : 928338248 FAX: 928468642**

**EMAIL: administracion@serexmaritimos.com**

**FINAL DESTINATION .:**

**PORT OF DISCHARGE LAS PALMAS, SPAIN**

**FINAL DESTINATION LAS PALMAS, SPAIN**

1. **Origin Certificate Consignee:**

**MASTER OF F/V “NO.7 CHOKYU MARU”**

**C/O Serex Maritimos, SL**

1. **Health Certificate Consignee:**

**MASTER OF F/V “NO.7 CHOKYU MARU”**

**C/O Serex Maritimos, SL**

1. **Packing List Consignee:**

**Fishing Eight Inc**

**406 Amapola Ave Suite 235, Torrance, CA 902501**

**TEL : (310)988-1588**

**FAX : (310)988-1589**

1. **Commercial Invoice Consignee:**

**NIBIRU LLC**

**140 South Cache Street**

**Jackson, Wyoming - USA**

**EIN 85-3423224**

1. **Incoterm: CFR**
2. **DELIVERY OF DOCUMENTS (COMPLETE ADDRESS, PHONE AND FAX, CONTACT PERSON):**

**TBC**

**Please let us know if you have some special requirement with the documents.**

**Comments:**

1. **THERMOGRAPH (Se debe colocar al menos un Termógrafo por contenedor).** **ITS NUMBER SHALL BE SHOWN ON B/L AND PACKING LIST.**
2. **PACKING LIST SHALL SHOW LOT NUMBERS AND DATES**
3. **CONTROL DE CARGA. Tomar fotos donde se observe claramente todos los detalles del contenedor, producto, etiqueta, termógrafo y precinto.**
4. **En la manera de lo posible, favor de solicitar al personal de estiba que se coloquen los barbijos y guantes correctamente al momento de filmar y tomar fotos.**

**Please pay close attention to the quality of the bags – easily torned bags can be a problem upon arrival and the bags must be properly closed.**