

U.S. SHIPPER'S LETTER OF INSTRUCTION (SLI)



Reference #:

Contact Name:

Contact Phone:

1. U.S. PRINCIPAL PARTY IN INTEREST (USPPI)

Name	EIN
<input type="text"/>	<input type="text"/>
Address / Cargo Location	State of Origin (If different from address)
<input type="text"/>	<input type="text"/>

3. OTHER: REQUIRED

Related Parties?	Routed Export Transaction?	Hazardous Materials?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

5. LICENSE DETERMINATION

License or License Exception/Exemption Type	
<input type="checkbox"/> NLR <input type="checkbox"/> DDTC <input type="checkbox"/> NRC <input type="checkbox"/> Multiple (See line items)	
<input type="checkbox"/> BIS <input type="checkbox"/> OFAC <input type="checkbox"/> Other	
License # or CFR Citation	DDTC Registration #
<input type="text"/>	<input type="text"/>
DDTC Eligible Party Certification Indicator?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

2. ULTIMATE CONSIGNEE

Name & Address	Consignee Type
<input type="text"/>	<input type="text"/>
Country of Ultimate Destination (If different from address)	FPPI Name (If different from Ultimate Consignee)
<input type="text"/>	<input type="text"/>

4. OTHER: CONDITIONAL

Intermediate Consignee Name & Address	FTZ Identifier
<input type="text"/>	<input type="text"/>
Used Vehicle(s): <input type="checkbox"/>	Sold En Route: <input type="checkbox"/>
Entry #	
<input type="text"/>	

6. SPECIAL INSTRUCTIONS

7. COMMODITY INFORMATION

Line	Origin	Commodity Description	Schedule B or HTS	ECCN or USML Category	Quantity / UOM	Gross Weight	Export Value
1	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/> Lic# / CFR: <input type="text"/> SME: <input type="checkbox"/> DDTC Qty/UOM: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>

8. TRANSPORTATION

Method of Transportation	Date of Export	Inbond Code
<input type="checkbox"/> Air <input type="checkbox"/> Ocean <input type="checkbox"/> Truck <input type="checkbox"/> Rail	<input type="text"/>	<input type="text"/>
Transportation Reference #	Exporting Carrier	
<input type="text"/>	<input type="text"/>	
Port of Export	Port of Unlading	Vessel Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Charges	Mode	Ocean Documentation Type
Prepaid Collect	<input type="checkbox"/> Consol <input type="checkbox"/> Direct	<input type="checkbox"/> Original Bill of Lading <input type="checkbox"/> Sea Waybill
Freight <input type="checkbox"/> <input type="checkbox"/>		
Origin Cost <input type="checkbox"/> <input type="checkbox"/>		
Duty <input type="checkbox"/> <input type="checkbox"/>		
Tax <input type="checkbox"/> <input type="checkbox"/>		
Customs <input type="checkbox"/> <input type="checkbox"/>		
Service Type		
<input type="checkbox"/> Port to Port <input type="checkbox"/> Port to Door <input type="checkbox"/> Door to Port <input type="checkbox"/> Door to Door		
In Case of Inability to Deliver		
<input type="checkbox"/> Abandon <input type="checkbox"/> Return to Shipper <input type="checkbox"/> Deliver to... (specify in special instructions)		

9. INSURANCE (OPTIONAL)

Insurance Requested?	Amount of Insurance	Declared Value for Carriage
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	OR <input type="text"/>

10. AUTHORIZATION

As a duly authorized representative of the USPPI/shipper I certify that all statements made and information contained herein are true and correct and that:

- For shipments in which Expeditors has been selected by the USPPI to act as authorized agent: USPPI hereby authorizes Expeditors International of Washington, Inc. to act as agent and attorney in fact with authority to prepare and file any Electronic Export Information (EEI) and to perform any act required by law, regulation or custom in connection with the exportation of the above referenced shipment.
- For air cargo shipments in which Expeditors is responsible for transportation (Agreement for Consent to Search): As required by TSA regulations, shipper agrees with Expeditors International of Washington, Inc., to, and hereby does, consent to search or inspection, including screening of its cargo pursuant to 49 CFR 1548.9(b).

Signature: _____

Title: _____

Date: _____