



## Shipment Form

<b>1 Payer account number and insurance details</b>		<b>4 Products &amp; Services</b> <small>(*Products not available to and from all location. Please go to <a href="http://dct.dhl.com">http://dct.dhl.com</a> to check on it.)</small>																			
Charge to <input checked="" type="radio"/> Shipper <input type="radio"/> Receiver <input type="radio"/> 3rd Party		Type																			
Payer Account No *		Product																			
Shipment Insurance Required ? See		<input type="checkbox"/> Delivery Notification <small>Please use *," if entering multiple email ID's</small>																			
<input type="checkbox"/> Yes Insured value		<input type="checkbox"/> Pre-alert Advisory																			
<b>2 From (Shipper)</b>		<b>5 Shipment details</b>																			
Shipper's Account Number *		Contact Name *																			
Shipper's Reference *		<table border="1"><thead><tr><th>Pieces*</th><th>Piece Weight *</th><th>KGS</th><th>Length(CM)</th><th>Width (CM)</th><th>Height(CM)</th></tr></thead><tbody><tr><td>1</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="6">Total number of Packages : 1 Total Weight : Kg(s)</td></tr></tbody></table>		Pieces*	Piece Weight *	KGS	Length(CM)	Width (CM)	Height(CM)	1						Total number of Packages : 1 Total Weight : Kg(s)					
Pieces*	Piece Weight *	KGS	Length(CM)	Width (CM)	Height(CM)																
1																					
Total number of Packages : 1 Total Weight : Kg(s)																					
Company Name *		<b>6 Full description of contents</b>																			
Country *		Give content and quantity *																			
City *																					
Address *																					
Postcode Suburb																					
State																					
Phone *																					
Federal Tax ID <input checked="" type="radio"/> CNPJ <input type="radio"/> CPF		<b>7 Non Document shipment only (Customs Requirements)</b>																			
IE/RG		Shipper's VAT/GST number																			
		Receiver's VAT/GST																			
		Declared Value for Customs (as on commercial/proforma invoice)																			
		Harmonised Commodity Code (if applicable)																			
		(FTR) Exemption:																			
<b>3 To (Receiver)</b>		TYPE OF EXPORT <input checked="" type="radio"/> Permanent <input type="radio"/> Temporary <input type="radio"/> Repair/Return																			
Company Name		Destination duties/taxes																			
Country *		<input checked="" type="radio"/> Receiver <input type="radio"/> Shipper <input type="radio"/> Others																			
City *		specify approved account number																			
Postcode Suburb																					
State																					
Contact Person *		<b>8 Shipper's agreement</b>																			
Phone *		Unless otherwise agreed in writing, I/we agree that DHL's Terms and Conditions of Carriage are all the terms of the contract between me/us and DHL and (1) such Terms and Conditions and, where applicable, the Warsaw Convention limits and/or excludes DHL's liability for loss, damage or delay and (2) this shipment does not contain cash or dangerous goods																			
Federal Tax ID <input checked="" type="radio"/> CNPJ <input type="radio"/> CPF		<input type="checkbox"/> I Agree																			
IE/RG		Date:																			