FIVE STAR FREIGHT SYSTEMS LTD

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M.I.B. BOOKING FORM OPR EXPORT CLEARANCE INSTRUCTIONS

NAME:		DATE:
REF:		CONTACT:
VAT NO:		
OFFICE CONTACT NO:	OUT OF HOURS TEL. NO:	
We/I hereby authorise Five Star Freight Systems Ltd and those authorised by Five Star freight Systems Ltd, to enter, sign and amend all customs entries completed on our behalf under Direct Representation		
Signed:	Full Name:	Date:
SHIPPER NAME: ADDRESS:		
SHIPPER VAT NO:		
PASSENGER NAME:		MOBILE NO:
FLIGHT NO:	FLIGHT DATE:	TIME:
NATURE OF GOODS:		
PLEASE CONFIRM IF THE GOODS ARE BEING EXPORTED FOR AN OPR PROCESS: (ie melted down and remade process)		
TARIFF NO:		
C.P.C NO:		
IPR / EU / OPR:		
SPECIAL INSTRUCTIONS AND TRANSPORT REQUIREMENTS:		