FIVE STAR FREIGHT SYSTEMS LTD

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M.I.B. BOOKING FORM OPR IMPORT 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:
CONSIGNEE NAME: ADDRESS:	
CONSIGNEE VAT NO: PASSENGER NAME:	MOBILE NO:
FLIGHT NO:	ARRIVAL DATE: TIME:
NATURE OF GOODS: PLEASE CONFIRM THAT THE GOODS HAVE UNDERGONE AN OPR PROCESS: (ie melted down and remade process) TARIFF NO: C.P.C NO: IPR / EU / OPR:	
SPECIAL INSTRUCTIONS AND TRANSPORT REQUIREMENTS:	