



Company Name:

### Safezone Logistics Plc

Document No:

OF/SZ/\_\_\_

Title:

### SHIPPER'S INFORMATION DETAILS

Issue No.

1

No.

Page 1

Name of the shipper (as per passport): \_\_\_\_\_

Moving from: ADDIS ABABA to: \_\_\_\_\_  
POC for Export Documentation: \_\_\_\_\_

Tentative personal departure date from Ethiopia: \_\_\_\_\_

Provisional address at destination:

Street# \_\_\_\_\_

city \_\_\_\_\_

Postal code \_\_\_\_\_

contact person \_\_\_\_\_

Tel: \_\_\_\_\_

E-mail: \_\_\_\_\_

Estimated Date of your arrival at destination: \_\_\_\_\_

Origin Doc Briefing

Destination Pre-Doc

Previous import Doc&yr \_\_\_\_\_

Passport copy \_\_\_\_\_

Previous importer \_\_\_\_\_

VHL/Car issues \_\_\_\_\_

Expected delivery date \_\_\_\_\_

planned Arrival \_\_\_\_\_

POC if available \_\_\_\_\_

POC name \_\_\_\_\_

Tel: \_\_\_\_\_

E-Mail : \_\_\_\_\_

Shipper took insurance with SAFEZONE LOG      YES      NO

If YES please make sure that you provided your detailed declaration value and paid for the insurance.

If NO please make sure to sign the Insurance Waiver Agreement

Shipment Type:- \_\_\_\_\_ (HHE ,UAB, VHL/CAR) Estimated Survey Volume \_\_\_\_\_

Done in \_\_\_\_\_

On \_\_\_\_\_

Signature