

IMPORTER SECURITY FILING (ISF) INFORMATION SHEET

Items 1-7 to be completed by shipper & verified by ISF Filer:

(1)SELLER NAME AND ADDRESS	(2)BUYER NAME AND ADDRESS
(3)CONSOLIDATOR (STUFFER) NAME AND ADDRESS	(4)CONTAINER STUFFING LOCATION NAME AND ADDRESS

Per ISF Rule, HTSUS, Country of Origin and Manufacturer
must be linked to one another at the line item level.
Add additional sheets for additional HTSUS numbers.

(5)COMMODITY HTSUS NUMBER(S) AND DESCRIPTION	(6)COUNTRY OF ORIGIN	(7)MANUFACTURER NAME AND ADDRESS

To be completed by forwarder:

House B/L#	Master B/L#	Vessel Name	Voyage No.
Date of Departure	Port of Departure	Container Number(s)	Last Load Date

Items 8-10 to be completed at destination by ISF Filer/Importer:

(8)Importer of Record No.	(9)Consignee No.	(10)Ship To Name & Address

This form, or something similar AND a copy of the commercial invoice(s) **MUST** be completed in English and emailed to the destination USA office no later than 72 hours prior to sailing. .

ORIGIN OFFICE INFORMATION:

NAME OF SENDER: _____
 DATE/TIME SENT: _____
 COMPANY NAME: _____
 RETURN EMAIL/FAX: _____

ISF APPROVAL NUMBER: _____

USA OFFICE AND ISF FILER INFORMATION

ISF COORDINATOR NAME: _____
 FORWARDED TO ISF FILER: _____
 DATE / TIME SENT: _____
 ISF FORM RECEIVED BY: _____
 DATE/TIME RECEIVED: _____

NOTE TO ISF FILER – EMAIL/FAX ISF CONFIRMATION NUMBER BACK TO USA OFFICE –
 EMAIL ADDRESS _____ - FAX# _____
 REFERENCING HBL NUMBER ASAP