|  |  |  |
| --- | --- | --- |
| **DATE** | **ORIGIN** | **PIECES** |
|  |  |  |
| **SHIPPERS CODE** | **DESTINATION** | **C. WEIGHT** |
|  |  |  |



Worldwide Door to Door Services

**HAWB NO**

**Telephone: +880-2-41040107~8**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **DOCS** | **SPS** | **E-COMMERCE** | **PREPAID** | **COLLECT** | **3RD PARTY** | **CATEGORY** |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SHIPPER :** | | | | | | | | **CONSIGNEE :** | | | | | | | |
| **ADDRESS :** | | | | | | | | **ADDRESS :** | | | | | | | |
| **BIN** |  | | | | | | | **BIN** | |  | | | | | |
| **ATTN:** | | | **TEL:** | | | | | **ATTN:** | | | | | **TEL:** | | |
| **DESCRIPTION OF GOODS:** | | | | | | | | | | | INVOICE CHARGES | | | | |
| ACCOUNT NO | | |  | |
| 3RD PARTY | | |  | |
| **DIMENTIONS:** | | | | **VM WEIGHT** | | **TOTAL V.METRIC WEIGHT** | | | | | PREPAID | | |  | |
| **1) CM X CM X CM** | | | | **KG** | | **KG** | | | | | DUTY | | |  | |
| **2) CM X CM X CM** | | | | **KG** | | E-COMMERCE | | |  | |
| **3) CM X CM X CM** | | | | **KG** | | COLLECT | | |  | |
| PACKING BY NAME: | | INSURANCE DO YOUR REQUIRE ?  INSURANCE COVERAGE? | | | | YES | INSURED AMOUNT | | | | OTHER | | |  | |
| NO | \*\* NOT TO EXCEED $10000 OR EQUIVALENT \*\* | | | | TOTAL | | |  | |
| **Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage loss, or delay as described in the Conditions of Contract** | | | | | | | | | | | | | | **HANDOVERD BY** | |
|  | |
| **I acknowledged and agreed “The terms and Conditions’’ of Contract on the back and warrant that all details given data are true and correct.** | | | | | PICKED UP BY | | | | | | |  | | | |
|  | | | | | | |
| DATE | | | | TIME | | |
|  | | | |  | | | DATE: | | | TIME: |

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