


Exporter/Shipper name and address (party shipping out the goods): Contact Number: Email Address:		Geest Booking Ref: Please return this form by email / fax / post to: Email: exportdocs@geestline.com Fax: 01489 873501 GEEST LINE LITTLE PARK FARM ROAD SEGENSWORTH FAREHAM HAMPSHIRE PO15 5TD * This is NOT the cargo delivery address* ** Cargo will not be shipped without a completed bill of lading instruction**						
Consignee name and address (Recipient on the island): Contact Number: Email Address:		<table border="1"> <tr> <td data-bbox="774 730 1002 1039"> Weight of the cargo (KGS): </td> <td data-bbox="1005 730 1233 1039"> Cubic Metres (length x width x height): </td> <td colspan="2" data-bbox="1236 730 1546 1039"> Value of Goods (we cannot customs clear the goods without this): </td> </tr> </table>			Weight of the cargo (KGS):	Cubic Metres (length x width x height):	Value of Goods (we cannot customs clear the goods without this):	
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Notify Party/Customs Agent at Destination (if you are not using an agent, please leave blank): Contact Number:		Vessel Name and Voyage (on booking confirmation):		Sailing Date (on booking confirmation):		Port of Discharge:		
Marks and Nos:		Description of Goods (include number and type of packages): 						
Payment Terms (All private individuals must pay cleared funds by 5pm Friday prior to sailing date) Please mark: Shipper to pay in UK <input type="checkbox"/> Consignee to pay at destination <input type="checkbox"/>								
Bill of Lading (No cargo can be released without an original Bill of Lading) Please mark where you would like us to send your bill of lading: Shippers Address: <input type="checkbox"/> Our agents at destination (immediate release) <input type="checkbox"/> Amount of copies <input type="checkbox"/>								
Do you require Geest Line insurance (recommended): YES <input type="checkbox"/> NO <input type="checkbox"/>						Name and Contact no:		