Inter-Orient Services

Customs House Broker
東方報關行
1455 Monterey Pass Road #205   Monterey Park, CA 91754
Tel: 323-263-1820   Fax: 323-263-8805   Email: jawana@interorientservices.com

Importer Security Filing – 10 (10項 進口安全申報)

Please submit your answers to Inter-Orient Services **2 business days BEFORE** the shipment is loaded on the vessel at the **port of origin.** Please include a copy of the **bill of lading, commerical invoice, packing list**, delivery instructions (if/when applicable) along with this 10+2 form. Thank you.

(1) Manufacturer (or supplier) name and address (製造商或供應商 姓名和地址)

Company name:			
Address:			
City:		Province/ State:	
Country:		Postal Code:	

(2) Seller name and address(賣主公司姓名和地址)

Company name:			
Address:			
City:		Province/ State:	
Country:		Postal Code:	

(3) Buyer name and address (買家公司姓名和地址)

Company name:			
Address:			
City:		Province/ State:	
Country:		Postal Code:	

(4) Ship to name and address (商品送給哪家公司姓名和地址)

Company name:			
Address:			
City:		Province/ State:	
Country:		Postal Code:	

Thank you for your business!

(5) Container stuffing Location (裝貨的地點)

Company name:	
Address:	
City:	
Country:	

City:		Province/ State:
Country:		Postal Code:

(6) Consolidator (stuffer) name and address (船運公司姓名和地址)

Company name:	
Address:	

City:		Province/ State:
Country:		Postal Code:

(7) Importer of record tax ID number (進口商的稅號)

(8) Consignee tax ID number (收貨商的稅號)

(9) Country of Origin of Goods (原產地)

(10) Commodity HTSUS Number (進口商品的稅號)

Vessel Name:		**Piece Count:**	
Ocean B/L Number:		**PO/Invoice #:**	
or			
AMS House B/L Number:			
AMS SCAC CODE:			
(Please include ALL House B/L# If more than one.)		**Container #:**	

Importer Name: _____   Email: _____

Signature: _____   Date: _____