

Inter-Orient Services

Customs House Broker

東方報關行

735 W Emerson Ave, Monterey Park, CA 91754

Tel: 323-263-1820 Fax: 323-604-1837

Email: ygarcia@interorientalservices.com; iosdox@interorientalservices.com; laimun.woo@fmgloballogistics.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, commercial 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:	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)

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(8) Consignee tax ID number (收貨商的稅號)

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(9) Country of Origin of Goods (原產地)

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(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:			
<i>(Please include ALL House B/L# If more than one.)</i>		Container #:	

Importer Name:

Email:

Signature:

Date:

Thank you for your business!