

# SHIPPER'S LETTER OF INSTRUCTIONS (SLI)



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|--|--|---|
| USPPI Name:  | Freight Location Company Name:   | Authorized Agent:   |
| USPPI Address Including Zip Code:  | Freight Location Address (if not USPPI address):   | Mohawk Global   |
| USPPI EIN (IRS) #:   | Related Party Indicator (select one):  | <input type="checkbox"/> Related <input type="checkbox"/> Non-Related |
| USPPI Reference #:   | Routed Export Transaction (select one):  | <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| Ultimate Consignee Name, Address & Contact   | Ultimate Consignee Type (select one):<br><br><input type="checkbox"/> Direct Consumer<br><input type="checkbox"/> Government Entity<br><input type="checkbox"/> Reseller<br><input type="checkbox"/> Other/Unknown | Intermediate Consignee Name, Address & Contact                        |
| Telephone Number:<br>Email:  |  | Telephone Number:<br>Email:   |
| Destination Import Number:   | Incoterms®   | TIB / Carnet?   |
| Country of Ultimate Destination:   | In-Bond Code:  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No           |
| State of Origin:   | Entry Number:  |   |
| Hazardous Material: <input type="checkbox"/> Yes <input type="checkbox"/> No   | FTZ Identifier:  |   |
| INSTRUCTIONS TO FORWARDER: <input type="checkbox"/> USPPI Requests Insurance: <input type="checkbox"/> No <input type="checkbox"/> Yes |  | <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect     |

Are there any items that require additional Partner Government Agency (PGA) reporting as in Appendix Q and Appendix X?      Yes      No

|                           |   |   |  |                            |                                  |             |  |  |  |
|---------------------------|---|---|--|----------------------------|----------------------------------|-------------|--|--|--|
| Gross Weight (kilos)      | SOLAS certification   | By checking SOLAS certification, I am certifying that the full shipment weight shown in the "Gross Weight (kilos)" box is the Certified Gross Weight which may be added to the container tare weight and used as the Verified Gross Mass (VGM) under the Method 2 of the SOLAS VGM regulation dated July 1, 2016. |  |                            |                                  |             |  |  |  |
| Domestic or Foreign (D/F) | Schedule B / HTS Number and Commercial Commodity Description<br>For Vehicles: VIN/Year, Make, Model and Vehicle Title Number are required | Quantity in Schedule B / HTS Units  | DDTC Quantity and DDTC Unit of Measure | Shipping Weight (in Kilos) | ECCN, EAR99 or USML Category No. | S M E (Y/N) | Export License No., License Exception Symbol, DDTC Exemption No., DDTC ACM No., DDTC CAT XXI Determination No., or NLR | Value at the Port of Export (US Dollars) | License Value by Item (if applicable) (US Dollars) |
|                           |   |   |  |                            |                                  |             |  |  |  |
|                           |   |   |  |                            |                                  |             |  |  |  |
|                           |   |   |  |                            |                                  |             |  |  |  |
|                           |   |   |  |                            |                                  |             |  |  |  |

|   |  |
|---|--|
| DDTC Applicant Registration Number:   | Eligible Party Certification: <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Are any of the goods intended for "Military End Use" or to a "Military End User" in the countries listed in 15 CFR 744.21(a). Refer to 15 CFR744.21(f) and (g) for definitions of Military End Use" and "Military End User".<br>Yes      No | <input type="checkbox"/> Check here if the USPPI authorizes the above named Authorized Agent to act as its true and lawful agent for purposes of preparing and filing the Electronic Export Information ("EEI") in accordance with the laws and regulations of the United States. It does not authorize the authorized agent to determine license authority or obtain licenses under EAR 758.3(b) or any other licensing agency. |

I certify that the statements made and all information contained herein are true and correct. I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false and fraudulent statements herein, failing to provide the requested information or for violation of U.S. laws on exportation (13 U.S.C. Sec . 305: 22 U.S.C. Sec. 401, 18 U.S.C. Sec 1001, 50 U.S.C. app. 2410).

|  |                    |
|--|--------------------|
| USPPI E-mail:  | USPPI Telephone #: |
| Printed Name of Duly Authorized Officer or Employee: |                    |
| Signature:   | Title:             |
| Date:  |                    |

# **SHIPPER'S LETTER OF INSTRUCTIONS (SLI)-EXTENDED**

