



Transcontainer (USA) Inc.

Date: _____

H.B/L (BKG) No.		ETD Loading Port(1st	
M.B/L (BKG) No.		T/S port (2nd)	
Vessel/Voy (1st)		ETA Discharge Port	
Vessel/Voy (2nd)		Shipper Name	
Shipment from		Letter issued by	
Shipment to		P.I.C/Tel No	

10 data elements for ISF Filing * Essential

(1) Seller name and address

Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(2) Buyer name and address

Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(3) Importer of Record number/FTZ applicant identification number

Number *	Status *
	CBP Assigned/IRS/EIN/SSN/Other()

(4) Consignee number

Number *	Status *
	CBP Assigned/IRS/EIN/SSN/Other()

(5) Manufacture/Supplier name and address

Manufacture/Supplier (A)	
Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

Manufacture/Supplier (B)	
Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(7) Country of Origin of the Goods

Manufacture/Supplier (C)	
Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(6) Ship to Party name and address

Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(8) Commodity Harmonized Tariff Schedule of the United States(HTSUS) Number

*** Please select one if you enter
multiple Manufacture/Supplier name
in (5) .

	Description of Goods *	Country of Origin *	HTSUS Number *	Manufacture/Supplier ***
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

(9) Container Stuffing Location

Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

(10) Consolidator/Stuffer name and address

Full Name *	
Address *	
City/State *	
Zip Code *	
Tel / Fax No.	
Contact Name	

