YOUR CONFIRMATION OF CONSIGNMENT OF SHIPMENT

TO INTERNATIONAL MOVING HEAVY LIFT CARGO JAPAN

Based on the estimate provided (indicate the Quote Reference number)

* The Quote Reference Number is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment Term and Invoice Payment

1. Your agreement and confirmation, that the quoted rates are quoted in are invoiced in JPY ONLY and Invoicing in JPY OLNY, and all bank wire sending of funds are for your account, and a copy of your “Bank Wire Transfer Funds Receipt” be sent to International Moving Heavy Lift Cargo Japan.
2. All invoices are invoiced on the indicated volume on the Sea Bill of Ladings and the Air Waybills. However, please note volumes when unloading the containers are checked for accuracy of the indicate volume of the shipment. Any difference/discrepancy of the actual volume of the shipment and as that indicated, an additional invoice for payment for the difference/discrepancy. Please ensure the accuracy of the true volume of the shipment.
3. Invoice payment of sea shipments is required at least 10 days and not less than 10 days prior to the shipment arrival of the Port of Entry in Japan.
4. Sea Shipments Bill of Lading are required to be received within 5 days and not less than 5 days from the date of sailing from the origin port of departure. Air Waybill are to be received within 1 day and not less than 1 day from the flight from the port of departure.

Payment Method:

1. Your Bank Wire Transfer Sending and Receiving Fees are for your account payment.
2. Bank Wire Transfer Sending and Receiving Fees are not included to in the quotation rate.

Remarks on the Japan Side Port Charges:

1. THC Japan side port and all other Japan side Port Charges are being sent as all PRE-PAID – Please Check (Yes ) (No )
2. THC Japan side port and all other Japan side Port Charges are being sent as collect and are to be billed back to us:

Please Check (Yes ) (No )

1. THC Japan side port and all other Japan side Port Charges are being sent as collect and are to be billed back to the customer

Please Check (Yes ) (No )

Your Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_