



Onward Shipping & Clearing Service, Inc.

RO RO INFORMATION REQUEST FORM

YOUR COMPANY INFO: _____

CONTACT: _____

TELEPHONE: _____

VALID QUOTE # _____ (if you do not have a valid quote please contact our rates department)

EXPORTER INFORMATION

**SHIPPER NAME _____ ** PHONE _____

**ADDRESS _____

**SOCIAL SECURITY / TAX ID # _____

CONSIGNEE INFORMATION

**NAME _____ **PHONE _____

**ADDRESS _____

VEHICLE/UNIT INFO

**MAKE _____ **MODEL _____

**VALUE _____ **VIN # _____

DIMENSIONS (if applicable) L _____ W _____ H _____ WEIGHT _____

PICK UP ADDRESS (If Applicable)

NAME _____ PHONE _____

ADDRESS _____

DATE AVAILABLE FOR PICK UP _____

SHIPMENT INFORMATION

**PORT OF LOAD _____ **PORT OF DISCHARGE _____

DATE _____

**** INDICATES REQUIRED FIELD**

*PLEASE PROVIDE COPY OF THE TITLE IN ORDER TO SECURE BOOKING.

*PLEASE BE SURE TO FILL OUT THE ENTIRE FORM IN ORDER TO AVOID DELAYS

***If your vehicle is older than 1999 and is being sent to Lagos, your request MUST STATE for commercial use only

Please provide your signature below:

I hereby affirm that the cargo listed above is available and is ready to load/sail. I also understand that if my booking is rolled and/or if I miss the vessel additional charges may apply:

X _____

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