

Importer Security Filing (ISF) Template

Date: _____

AMS MASTER VESSEL BILL OF LADING# (SCAC code required):		
AMS HOUSE BILL OF LADING# (AMS FILER SCAC code required):		
VESSEL NAME/VOYAGE:		
VESSEL CUT OFF DATE:		
VESSEL LOAD DATE:		
VESSEL DEPARTURE DATE:		
U.S. ARRIVAL DATE/PORT:		
1) Name and address of the overseas seller		* Usually the same as manufacturer / supplier, although this may vary.
Name:		
Address:		
name:		
Postal Code:		
Country:		
2) Name and address of the US buyer		* Usually the same as the importer, although this may vary.
Name:		
Address:		
City:		
Postal Code:		
Country:		
3) Consignee identification number		* IRS / tax ID number. Provide if known, otherwise will be obtained from the consignee.
CIN:		
4) Name and address of manufacturer or supplier		
Name:		
Address:		
City:		
Postal Code:		
Country:		
5) "Ship to" party		* Usually the same as the consignee although this may vary.
Name:		
Address:		
City:		
Postal Code:		
Country:		
6) Country(s) of origin		* Must also be clearly shown on the commercial invoice which goods are from what country(s).
Country(s):	UK	
7) Container stuffing location		* Name and address of physical location where goods are stuffed into the container.
Name:		
Address:		
City:		
Postal Code:		
Country:		
8) Container stuffer		* Name and address of the party that stuffs or arranges for the stuffing of the container.
Name:		
Address:		
City:		
Postal Code:		
Country:		
IMPORTANT: Send template and copy of commercial invoice to the destination Emo Trans office no later than 72 hours before lading on the vessel.		