



Summer Bee
Customs Brokerage

Import Security Filing (ISF) Data Sheet

Importer Purchase Order#		Departure Date	
Importer of Record # (IRS)		Consignee No.	
Master Bill Of Lading #		SCAC Code	
House Bill Of Lading #		SCAC Code	

Address Information Section:

Seller (owner) Name & Address

Buyer (owner) Name & Address

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Ship to Party: Name & Address

Manufacturer (supplier) Name & Address

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Container Stuffing Location Name & Address

Consolidator (stuffer) Name & Address

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Commodity Description _____
HTS NO. _____ Country of Origin: _____
HTS NO. _____ Multiple C/O: _____
HTS NO. _____ Container Number _____

Please return this form to us at least 72 hours prior to the vessel loading date and time. Please note that vessels load usually 1-2 days prior to their departure. If you need assistance completing this form please contact us at (650) 409-1010 or E-mail: info@summer-bee.com

Customs Broker | Global Freight Forwarder | Domestic Transportation | Custom Bond | Cargo Insurance

1633 Bayshore Highway, Suite 148, Burlingame, CA 94010 Tel (650) 409-1010 Fax (650) 763-1286