



SHIPPING INSTRUCTION
CARGILL INDONESIA

2018

SHIPPER		(SELLER WITH COMPLETE ADDRESS)
CONSIGNEE		PT. CARGILL INDONESIA
CONSIGNEE'S ADDRESS		#REF!
NOTIFY PARTY		#REF!
PORT OF DISCHARGE		
GOOD'S DESCRIPTION		(ACCORDING TO THOSE MENTIONED IN THE PO/ CONTRACT/ MASTERLIST)
HS (HARMONIZE SYSTEM CODE)		(SIX DIGITS OF NUMBER, BUT CONSIGNEE MAY REQUEST TO REMOVE IT IF THE HS CODE IS DIFFERENT THAN SELECTED BY THE DESTINATION COUNTRY)
MARKING	1	NAME OF CONSIGNEE
	2	PO NUMBER or CONTRACT NUMBER
	3	FINAL DESTINATION
INVOICE CONTENTS	1	SHIPPER'S HEAD LETTER
	2	SHIPPER WITH COMPLETE ADDRESS
	3	CONSIGNEE WITH COMPLETE ADDRESS

	4	INVOICE NUMBER
	5	DATE OF INVOICE
	6	REF: CONSIGNEE PO'S NUMBER
	7	PORT OF DISCHARGE
	8	TERMS OF DELIVERY
	9	GOODS' DESCRIPTION
	10	QUANTITY ORDER
	11	PRICE PER UNIT
	12	AMOUNT
	13	TOTAL AMOUNT
	14	SIGNATORY OF AUTHORITY
	15	OFFICIAL STAMP
PACKING LIST CONTENTS	1	SHIPPER WITH COMPLETE ADDRESS
	2	CONSIGNEE WITH COMPLETE ADDRESS
	3	PACKING LIST'S NUMBER
	4	DATE OF PACKING LIST
	5	REF: CONSIGNEE PO'S NUMBER
	6	REF: INVOICE'S NUMBER
	7	PORT OF DISCHARGE
	8	TERMS OF DELIVERY
	9	MARKING
	10	GOODS' DESCRIPTION
	11	QUANTITY ORDER
	12	QUANTITY OF PACKAGING
	13	DETAIL DIMENSION OF EACH PACKAGING (LENGTH (CM) + WIDTH (CM) + HIGHT (CM))
	14	DETAIL WEIGHT OF EACH PACKAGING
	15	TOTAL WEIGHT
	16	TOTAL DIMENSION
	17	SIGNATORY OF AUTHORITY
	18	OFFICIAL STAMP
BILL OF LADING		
- SHIPPER	:	(AS ABOVE)

- CONSIGNEE'S ADDRESS	:	(AS ABOVE)
- NOTIFY PARTY	:	(AS ABOVE)
- PORT OF DISCAHARGE	:	(AS ABOVE)
- GOODS' DESCRIPTION	:	AS ABOVE (MIN 5 ITEMS IF THEY ARE MORE THAN 5)
- QUANTITY OF PACKAGE	:	(AS SAME AS PACKING LIST)
- KIND OF PACKAGE	:	WOODEN/ PALET/ BOX/ LOOSE
- MEASUREMENT N WEIGHT	:	(AS SAME AS PACKING LIST)
- LOCAL AGENT AT DESTINTION	:	(DETAIL ADDRESS, PIC AND PHONE NUMBER)
ATTENTION		
SEND THE DRAFT OF INVOICE, PACKING LIST, CERTIFICATE OF ORIGINAL FORM D/E/JIEPA (IF APPLICABLE) AND BILL OF LADING TO CONSIGNEE'S PIC (Achmad_sidik@cargill.com ; Siti_chalilah@cargill.com) FOR VERIFICATION AND THEN ISSUE THE ORIGINAL AFTER GET CONSIGNEE'S APPROVAL.		
DOCUMENT REQUEST		
- INVOICE	:	3 ORIGINALS
- PACKING LIST	:	3 ORIGINALS
- BILL OF LADING	:	3 ORIGINALS + 3 COPIES NON NEGOTIABLE
- INSURANCE CERTIFICATE	:	TRIPLICATE
- CERT OF ORIGINAL (FORM ATIGA)	:	1 ORIGINAL + 1 DUPLICATE (IF AVAILABLE)
- FUMIGATION CERTIFICATE	:	TRIPLICATE (IF AVAILABLE)
SEND DOCUMENT TO:		
ADDRESS	:	#REF!
PIC	:	ACHMAD SIDIK / SITI CHALILAH
PHONE	:	+6221 - 5789-1851 / 5789-1932
EMAIL	:	achmad_sidik@cargill.com
		siti_chalilah@cargill.com