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| --- | --- |
| **Shipper's Details** |   |
| Shipper's company name : |   |
| Shipper's company address : |   |
| Shipper's contact person name : |   |
| Shipper's contact number : |   |
| ​Shipper’s email ID : |   |
| **Consignee's Details** |   |
| Consignee's company name : |   |
| Consignee's company address : |   |
| Consignee's contact person name : |   |
| Consignee's contact number : |   |
| **Shipment's Details** |   |
| Commodity : |   |
| Total number of package : |   |
| Weight of the shipment : ​ |   |
| Service mode. : (IP / IPF) |   |
| ​Email: |   |
| INV- AMOUNT: |   |
| **Account number in which the shipment needs to be charged:** |   |