

Customs Broker  
Import/Export Transportation  
Air/Ocean Forwarder  
Drawback Specialist  
Affiliates Worldwide  
IATA Airfreight Agent-FMC 2995



## **CLEARFreight, Inc. Routing Order**

Date: \_\_\_\_\_ Supplier Company Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ email: \_\_\_\_\_  
P.O. # \_\_\_\_\_ Terms of Sale: \_\_\_\_\_  
Supplementary cargo insurance requested? \_\_\_ yes \_\_\_ no  
Shipment will be ready on: \_\_\_\_\_

### **SUBJECT: ROUTING REQUEST**

**Please note that we have made arrangements to have our future consignment by AIR or OCEAN forwarded through CLEARFREIGHT Incorporated via their local office; detailed as follows:**

Company name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone/Fax: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**We ask that you route any shipments to us through this firm until further notice. Thank you for your cooperation.**

Very truly yours,

PRINT YOUR NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
TITLE: \_\_\_\_\_ COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_ DATE: \_\_\_\_\_

## **CLEARFreight, Inc**

**Los Angeles – New York – San Francisco – Seattle – Portland – Detroit – Chicago – Miami – Tokyo – Netherlands**

**web: [www.clearfreight.com](http://www.clearfreight.com) email: [info@clearfreight.com](mailto:info@clearfreight.com)**