

# UniGroup Worldwide UTS International Registration Form

Survey Completed:
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**General Information:**

Quote #:		Order #:		Reg. Date:	
Transferee's Name:			Agency Contact:		
Origin:		O/A:	Destination:		D/A:
Insurance Valuation \$					
Mode of Transport: <input type="checkbox"/> LCL <input type="checkbox"/> Air <input type="checkbox"/> Auto <input type="checkbox"/> Other <input type="checkbox"/> FCL Container Size: <input type="checkbox"/> 20 <input type="checkbox"/> 24 <input type="checkbox"/> 40 <input type="checkbox"/> 40 HC					
Auto: <input type="checkbox"/> Yes <input type="checkbox"/> No			Ctr. Req. Date:		
Shipment Scope: <input type="checkbox"/> Door-to-Door <input type="checkbox"/> Warehouse-to-Door <input type="checkbox"/> Port-to-Port <input type="checkbox"/> Door-to-Warehouse <input type="checkbox"/> Warehouse-to-Warehouse					

**Origin Information:**

Transferee's Address:	
Transferee's Telephone Number:	Transferee's Fax Number:

**Destination Information:**

Transferee's Address:	
Transferee's Telephone Number:	Transferee's Fax Number:
Transferee's Arrival Date:	

**Vehicle Information:**

Year:	Make:	Model:
Color:	VIN # :	MLG:
License #:	Weight :	CFT :

**Billing Information:**

Company Name:	Origin Charges:	Booking Commission:
<input type="checkbox"/> PPD <input type="checkbox"/> National Account – National Acct. No.		Weight Allowances:

**Special Instructions:**

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One Worldwide Drive ■ St. Louis, MO 63026  
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 Web-uw@unigroupworldwide.com  
 24-Hour Service

Effective 5/1/02