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SHIPPER'S EXPORT DECLARATION (SED) AUTHORIZATION FORM

I _____ **DO / DO NOT**
Print Name of authorized person (please circle one)

Authorize on behalf of _____ (Company Name)
Shipper/Exporter Name(U.S. Principal Party of Interest)

IFSvs, Inc., to act as forwarding agent for export control, customs purposes and to sign any Shipper's Export Declaration (S.E.D.), or transmit such export information electronically, which may be required by law or regulation in connection with the exportation or transportation of any merchandise on behalf of said U.S. Principal Party in Interest certifies that necessary and proper documentation to accurately complete the SED or transmit the information electronically is and will be provided to the said Forwarding Agent. The U.S. Principal Party in Interest further understands that civil and criminal penalties may be imposed for making false or fraudulent statements or for the violation of any United States laws or regulations on exportation and agrees to be bound by all statements of said agent based upon information or documentation provided by exporter to said agent.

As a requirement of the U.S. Census Bureau of Export Administration, Shipper's Export Declarations (S.E.D.) are now required on all shipments exported to Puerto Rico where one item of the commodities included in the shipment are valued at \$2,500.00 or more. All S.E.D.'s filed electronically on behalf of the shipper, will have a \$25.00 fee. If corrections have to be made after the SED has been filed, a \$50.00 charge will apply.

Please advise if this fee is: Paid by Shipper Paid by Consignee

If you circle "DO NOT AUTHORIZE" you must provide copy of the FILED S.E.D. to our office. AllStates Freight Link will provide your Company with the booking and Bill of Lading no.'s. assigned to the shipment.

SIGNATURE OF AUTHORIZED PERSON ABOVE

SHIPPER EIN / IRS NO.

TITLE

DATE

PLEASE NOTE THAT SHIPMENTS WILL NOT SAIL UNLESS WE HAVE COPY OF THIS FORM COMPLETELY FILLED AT OUR OFFICES & THE NECESSARY COPY OF THE COMMERCIAL INVOICE(S).