VGM (VERIFIED GROSS MASS) CERTIFICATE

SHIPPER'S COMPANY NAME:		BOOKING/BILL OF LADING NO.:	
ADDRESS:		NAME OF BOOKED VESSEL:	
		VOYAGE NUMBER:	
AUTHORIZED VGM CONTACT:		PLACE OF RECEIPT:	
PHONE NO:		PORT OF DISCHARGE:	
FAX NO:		FINAL DESTINATION:	
E-MAIL:		FREIGHT TERMS:	
CARRIER BOOKING NUMBER:		CONTAINER NUMBER:	
NAME OF BOOKED VESSEL:		MARKS & NUMBERS:	
VOYAGE NUMBER:		NO. & KINDS OF PKG:	
		DESCRIPTION OF GOODS:	
CARGO PIECES	SHIPMENT WEIGHT	PALLET/PACKAGING WEIGHT	TOTAL VGM
VERIFIED GROSS MASS (VGM) IN KG (KILOGRAMS):		SUBMISSION DATE: SIGNATURE OF SHIPPER'S AUTH	HORIZED CONTACT: