

## **e-MANIFEST SETUP PACKAGE**

U.S. Customs and Border Protection (CBP) published a *Federal Register* notice detailing the land border ports that will require truck carriers to use the Automated Commercial Environment (ACE) to transmit advance electronic cargo information (e-Manifest). Effective January 25, 2007, the filing of e-Manifest became mandatory at all U.S. ports of entry.

Electronic Manifests must be received by Customs one hour prior to arrival at the border for non food related items, and two hours prior to arrival for food items regulated by the U.S. Food & Drug Administration (FDA).

Carriers may file e-Manifests with CBP through the web-based ACE Secure Data Portal, via a CBP approved electronic data interchange (EDI), or through a third party who may submit the electronic manifest information to CBP on their behalf via EDI or the web portal.

Pacific Customs Brokers Inc. (USA) has made available a software application for submitting your ACE electronic truck manifest. In order to participate, you will need to provide us with a letter of intent and information on your conveyances and consignees.

Pacific Customs Brokers Inc. is proud to offer full and partial (self) e-Manifest filing services, suitable for your business needs. By completing the attached documentation, you are giving us a better understanding of your business, allowing us to offer you the best service and rates available.

By choosing Pacific Customs Brokers Inc. for your e-Manifest filing services, you will be able to utilize our live reception team, ALWAYS open operation and our designated Carrier Help Desk. In addition, our e-Manifest system features a record keeping functionality that will help keep you compliant with the record keeping requirements set by CBP for commercial carriers.

A full account setup packet is included and can be returned once completed via email to [e-Manifest@pcbusa.com](mailto:e-Manifest@pcbusa.com) or faxed to 360.332.1506. You may also call us at 888-538-1566. Pacific Customs Brokers thanks you for your business. A member of our team will contact you shortly.

### **ACCEPTABLE FORMS OF IDENTIFICATION**

The following ID types are required by U.S. Customs & Border Protection for entry into the United States.

- **Passport**
- **Passport Card**
- **Trusted Traveler Card such as:**
  - NEXUS ID
  - SENTRI ID
  - FAST ID
- **Enhanced Driver's License**
  - Participating Provinces:
    - British Columbia
    - Manitoba
    - Ontario
    - Quebec
  - Participating States:
    - Washington
    - Michigan
    - New York
    - Vermont

\*\*For passengers under the age of 16 a birth certificate will be accepted if the above are not available.

## ***Company Information***

Company Name: \_\_\_\_\_

Company Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Postal Code/Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

SCAC Code: \_\_\_\_\_ (appears at the beginning of your old PAPS stickers)

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

After Hours Emergency Contact Name: \_\_\_\_\_

After Hours Emergency Contact Number: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you an approved FAST carrier?: \_\_\_\_\_

How many trucks per week will be crossing: \_\_\_\_\_

If you would like to receive electronic updates to your email address or phone number, please list them here: \_\_\_\_\_

***Personal Information of Driver***

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:     M     F

Citizenship: \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Phone: \_\_\_\_\_

***Travel Document Information*** (You are required to keep a minimum of 1 travel document on file)

Driver's License Number: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

Is this an Enhanced ID?:   YES     NO

\*If NO a second ID is required.

\*Second Document Type: \_\_\_\_\_

Document Reference ID: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

\*See "Acceptable ID List" for the forms of ID required by U.S. Customs and Border Protection.

***Personal Information of Crew***

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:     M     F

Citizenship: \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Phone: \_\_\_\_\_

***Travel Document Information*** (You are required to keep a minimum of 1 travel document on file)

Driver's License Number: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

Is this an Enhanced ID?:   YES     NO

\*If NO a second ID is required.

\*Second Document Type: \_\_\_\_\_

Document Reference ID: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

\*See "Acceptable ID List" for the forms of ID required by U.S. Customs and Border Protection.

***Personal Information of Passenger***

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:     M     F

Citizenship: \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Phone: \_\_\_\_\_

***Travel Document Information*** (You are required to keep a minimum of 1 travel document on file)

Driver's License Number: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

Is this an Enhanced ID?:   YES     NO

\*If NO a second ID is required.

\*Second Document Type: \_\_\_\_\_

Document Reference ID: \_\_\_\_\_

Country and State of Issue: \_\_\_\_\_

**\*See "Acceptable ID List" for the forms of ID required by U.S. Customs and Border Protection.**

**Tractor Information** (Please fill out one per vehicle)

Full Vehicle ID Number (VIN#): \_\_\_\_\_

License Plate Number: \_\_\_\_\_

License Plate State/Province: \_\_\_\_\_

License Plate Country: \_\_\_\_\_

Vehicle Description/Type of Truck: \_\_\_\_\_

DOT Number (optional): \_\_\_\_\_

We will need additional information if a shipment is picked up in Canada but is to be bonded into the United States.

**Trailer Information** (Please fill out one per trailer)

Equipment Description/Type of Trailer: \_\_\_\_\_

License Plate Number: \_\_\_\_\_

License Plate State/Province: \_\_\_\_\_

License Plate Country: \_\_\_\_\_

**e-Manifest Application Form**

Please forward completed application form to:

Pacific Customs Brokers Inc.  
1400 A Street  
Blaine, WA  
98230  
Email: [e-Manifest@pcbusa.com](mailto:e-Manifest@pcbusa.com)  
Fax: 877.532.3253 or 360.322.1506

**SECTION I: APPLICANT IDENTIFICATION**

Date of Application: \_\_\_\_\_ SCAC Code: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Head Office Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal/ZIP Code: \_\_\_\_\_

Country: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Fax/Telex: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_

United States Office (if different from Head Office): \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal/ZIP Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax/Telex: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_

***Disclaimer and waiver of responsibility***

Every effort has been made to ensure that the information provided through the e-Manifest is accurate. Use of Pacific Customs Brokers Inc. services to prepare or submit an electronic manifest is entirely at the risk of the client. Pacific Customs Brokers Inc. shall not be liable, directly or indirectly, to the customer or any other third party for any damage, penalties, fines, delays or refused entry resulting from the creation or use of the e-Manifest for any reason, including mistakes and clerical errors.

Pacific Customs Brokers Inc. and its employees or agents assume no responsibility for and give no guarantees or warranties concerning the accuracy, completeness or up-to-date nature of the information entered into the e-Manifest or submitted on the customer's behalf.

Name: \_\_\_\_\_





Title: \_\_\_\_\_ (to be signed by a corporate officer)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## BLANKET CARD AUTHORIZATION FORM FOR SERVICES/SHIPMENTS

CARD INFORMATION			
Customer Account # (if known)		Currency <input type="radio"/> CAD <input type="radio"/> USD	
<input type="radio"/> 	<input type="radio"/> 	<input type="radio"/> 	<input type="radio"/> 
Name As It Appears on Card		Company Name (if applicable)	
Billing Address As Shown On Credit Card Statement		Position/Title	
City	Province / State	Postal / Zip Code	Country
Phone Number	Fax	Email	
Card Number		Expiry Date (mm/yy)	Card Verification Code (CVC)
Authorized Signature Of Card Owner <b>SIGN HERE</b>		Date Of Signing	

### BY MY SIGNATURE ABOVE, I CERTIFY THAT I HAVE READ AND UNDERSTOOD ALL TERMS SET OUT BELOW

1. By affixing my signature above, I hereby authorize Pacific Customs Brokers Ltd., Pacific Customs Brokers Inc., Pacific Overseas Forwarding Inc. and/or PCB Highway Sufferance Warehouse (A Division of P.C.B. Properties Ltd.) to charge the outstanding balance on my account to the above identified card ("Card") according to the terms of services provided to me, which may have been made over the phone, by fax or via the internet. By paying with the Card, I accept all responsibilities for completeness and accuracy of the information provided and represent and warrant that I have the legal authority to use the Card. Unauthorized Card use will result in payment reversal and additional administrative fees. This authorization will remain in force until I revoke this authorization in writing. I also understand that should my card's expiration date change, if I am issued a new card or if I wish to utilize a different card than presented on this form, I will complete and provide Pacific Customs Brokers Ltd. a new Blanket Credit Card Authorization Form at least 15 days prior to the next billing date.

2. I also understand that all quotations are subject to change without notice due to changes or discrepancies in the weight or size of a shipment or work performed. The final and correct fee will be automatically charged to my Card and I understand that declined transactions may be subject to an additional administrative fee. If I fail to dispute a charge within fifteen (15) days from the time the Card is charged, I hereby agree that the charges are valid and agree not to dispute said charges.

3. \* **An Import Disbursement Fee (currently at a market rate of 3%, however subject to change) will be applied (minimum \$5.00) against all funds disbursed on the client's behalf including, but not limited to, Duty & Taxes.**

4. I acknowledge receipt of this document, all future communication hereafter, and any additional documentation as may become required, electronically, executed in one or more counterparts, and together such counterparts shall constitute one whole. By signing this document and providing my email address above, I give my express consent, as defined by **Canada's Anti-Spam Legislation ("CASL")**, to receive electronic messages relevant to my relationship with Pacific Customs Brokers Ltd. or any affiliate, including industry updates, customs regulations, trade compliance education and events. I understand that my consent may be withdrawn at any time by visiting [www.pcb.ca/unsubscribe](http://www.pcb.ca/unsubscribe).

5. Your information is collected for purposes of verification with the card issuer/processors to prevent fraudulent usage. Pacific Customs Brokers Ltd., Pacific Customs Brokers Inc., Pacific Overseas Forwarding Inc. and/or PCB Highway Sufferance Warehouse (A Division of P.C.B. Properties Ltd.) will not share your information with any third party. Pacific Customs Brokers Ltd., Pacific Customs Brokers Inc., Pacific Overseas Forwarding Inc. and/or PCB Highway Sufferance Warehouse (A Division of P.C.B. Properties Ltd.) takes special care to ensure that all account and personal information is kept confidential.

## ACE EMANIFEST REQUEST SHEET – INTO USA

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Please print clearly to ensure that numerals and letters are decipherable.

Carrier Name		SCAC Code
Trip # (Leave blank if we are to generate the trip number for you)		Estimated Time of Arrival
Port of Crossing <input type="radio"/> Blaine (Pac Hwy) <input type="radio"/> Sumas <input type="radio"/> Other		if "Other" please specify
Driver First & Last Name	Driver Contact Phone Number	Driver Fax Number
Full Name(s) of Crew (if applicable)		
Full Name(s) of Passengers (if applicable)		
Truck License Plate Number		Province/State/Country
Trailer License Plate Number(s) (if applicable) <i>**if listed differently on the invoice and/or Bill of Lading**</i>		Trailer #2 License Plate Number
Address of Pick Up		
Address of Delivery		

### **\*\* ATTENTION CARRIER – IMPORTANT INSTRUCTIONS \*\***

Please attach a copy of the waybill and invoice with all of the shipment control numbers (SCN) and piece counts (smallest exterior packaging), description of goods, and weights for each type. If any information requested on this sheet is not on the invoice or waybill, please include here. If we do not have the driver, crew and passenger or vehicle information on file, we will require a completed information sheet.