**International Transportation Plan**(to be submitted in English only)

Please approve the following Transportation Plan:

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| A 1 | **Consignor:**[Name, Address, Phone and Fax Number of dispatching Security Officer] |   |
| A2 | **Consignee:**[Name, Address, Phone and Fax Number of receiving Security Officer] |   |
|   |   |   |
| B | **DSA/NSA PoC:**(Address, Emailad, Phone and Fax Number of authorised Point of Contact (PoC) in the dispatching and the receiving country as well) |   |
|   |   |   |
| C | **Description of Consignment:** |   |
| C 1 | Contract or Tender Number: |   |
| C 2 | Export License or other applicable Export Authorization citation: |   |
| C 3 | Transport License for consignment of hazardous material: |   |
| C 4 | Consignment Description:[Description of Consignment and Classification level — if possible use abbreviation (C) (S)] |   |
|   |   |   |
| D | **Package Description:** |   |
| D 1 | Type of package:[e.g.box, card, metal box] |   |
| D 2 | Number of packages: |   |
| D 3 | Number of enclosed classified items in each package: |   |
| D 4 | Package dimensions: |   |
| D 5 | Package weight: |   |

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| **E** | **Routing of Consignment:** |   |
| E 1 | Date/time of Departure: |   |
| E 2 | Date/estimated time of arrival: |   |
| E 3 | Routes to be used between point of origin, point of export, point of import and ultimatedestination:[Locations of Transfer — if possibleencode locations] |   |
| E 4 | Method of transport for each portion of theconsignment:[Name and Adress of all shipment companies involved — if possible specify Flight, Train or Ship Number] |   |
| E 5 | Freight Forwarders/Transportation Agentsto be used:[Name, Address, Phone and Fax Number of all commercial courier companies involved — The companies have to hold Facility Security Clearances up to the classification and safeguards level necessary] |   |
| E 6 | Customs or Port Security Contacts: [Name, Phone and Fax Number of PoC's] |   |
|   |   |   |
| F | **Authorized courier(s):** |   |
| F 1 | Name(s) and identification of authorizedCourier(s):[Name, First Name, Date of Birth, Passport-/ID- Card No. and Courier Certificate used] | 1. |
|   |   |   |
| G | **Security Officer's signature, date and stamp of the requesting facility:** |   |   |
| H | **Signature, date and seal of the releasing NSAJDSA:** |   |

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| --- | --- | --- |
| I | Signature, date and seal of the receiving NSA/DSA: |  |
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