ACE AIR EMANIFEST
LETTER OF INTENT

This document serves as the 'Letter of Intent' to participate in ACE AIR EMANIFEST with Customs and Border Protection through the service provider herein stated.

Company Name: _____ wish to participate in "Air Manifest" as an ***"Deconsolidator" or a "Container Freight Station (CFS) Operator".***

SECTION I: GENERAL CLIENT INFORMATION

Date: _____

Company Name: _____

Business Address: _____

City: _____

Province/State: _____ Postal/Zip Code: _____

Country: _____

Company Contact Name: _____
(Business Contact in the U.S.)

Telephone Number: _____ Fax/Telex: _____

Company E-mail: _____

Technical Contact Name: _____
(If different from Business Contact)

List any other CBP automated systems (including the ACE Portal) in which your company is currently operational or testing. For each system, provide your company's account identifier (SCAC, ICAO, ABI filer code, ACE ID, etc.) and the name of your assigned Client Representative.

_____

SECTION II: PROCESSING INFORMATION

Type 2 Custodial bond number: _____

Type 3 International Carrier bond number: _____
(If submitting advance consolidated (house) air shipment information to Air AMS)

CBP facility FIRMS code: _____

Agent Code: _____ (BCBP + File Code)

SECTION III: SOFTWARE VENDOR

GeTS eTrade (Canada) Inc.
100 York Blvd., Suite 260
Richmond Hill, Ontario L4B 1J8
Tel: (905) 763-6887
Fax:(905) 763-2321

Contact Name: Clarice Argosino
Tel: (905) 763-6887 x 208
Email Address: billingadmin@globaletrade.services

CBP Identifier/Transmitter ID: **P060**

Data communications method: **MPLS**
Data communications Channel: **AMS.AIR.P060.OUTBOUND / QM_MQP8**
Programming Message Type: **AIR CAMIR**

I,_____ of _____,
　　　　　　(Name printed)　　　　　　　　　　　　　**(Registered Company Name)**

Agree to abide by and meet the established standards and conditions of Customs and Border Protection in ACE AIR EMANIFEST. I declare that all statements made herein are true and correct and that all information transmitted will be true, accurate and complete.

Signature:_____　　Date: _____