

Evans  
International  
Freight  
Consolidators



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# NOMINATION/ AGENT ROUTING FORM

**TO: EIFC LOAD PORT AGENT**

Agent : \_\_\_\_\_  
Contact: \_\_\_\_\_  
\_\_\_\_\_

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

POL : \_\_\_\_\_

POD : \_\_\_\_\_

**OVERSEAS AGENTS DETAILS**

Company Name: \_\_\_\_\_  
Address ; \_\_\_\_\_  
Contact ; \_\_\_\_\_  
Tel ; \_\_\_\_\_  
Email ; \_\_\_\_\_  
Fax ; \_\_\_\_\_  
\_\_\_\_\_

**CONSIGNEE / AGENT (YOUR DETAILS)**

Company Name: \_\_\_\_\_  
Address ; \_\_\_\_\_  
Contact ; \_\_\_\_\_  
Tel ; \_\_\_\_\_  
Email ; \_\_\_\_\_  
Fax ; \_\_\_\_\_  
\_\_\_\_\_

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agreed rates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorised by: \_\_\_\_\_

