SSRL/LCLS User Shipping Request Form

(Non-Hazardous Material)

Will this be shipped to a location outside of the U.S.? No ___ Yes ___
If yes, user must complete Power of Attorney and certify concurrence with terms and conditions.
Confirm with Cathy Knotts or Lisa Dunn that this has been completed. _____

- It can take several days to process shipping requests through SLAC. Missing or insufficient information will delay shipments further.
- Hazardous Materials Shipments must be declared on the Hazardous Material Shipping Form and must be approved by ES&H representative.

Your Name: _____ Phone: _____ Email: _____ Date:_____

Proposal #: _____ **Spokesperson/PI:** _____

Ship to (If being shipped to an intermediary, list all recipients):

Recipient Name: _____

Institution: _____

Address: _____

City: _____ State/Province: _____

Zip: _____ Country: _____

Intermediary Name: _____ Address:_____Phone:_____

Intermediary Name: _____ Address:_____Phone:_____

Ship via:

[ ] *Federal Express*   [ ] *UPS*   [ ] *Truck*
  [ ] Overnight   [ ] Next-Day Air   [ ] Consolidated
  [ ] Economy (2-day)   [ ] Regular Air (3 days)   [ ] ABF
              [ ] Ground (5-6 wkg days)   [ ] Viking
[ ] *Airborne Express*   [ ] *Other:* _____

Method of payment:

[ ] Pre-paid   [ ] Carrier account: _____

[ ] SSRL/LCLS User Account Number: _____

Shipment must arrive by: _____   (this is the date SLAC Shipping & Receiving looks at to determine shipping method)

Insurance: [ ] none
        [ ] declare $_____   **(Declared value is a requirement for International shipments)**

User Shipping Form Attachment

Total #. of Packages: _____

Package 1 of _____

Item	Detailed Description of Each Item (Include manufacturer, and if commercial product list url of manufacturer and item)	Identifying Numbers if known (Model, Serial, Property, RA, ECCN)	Weight	Declared Value
1				
2				
3				
4				
5				
6				

Total Weight _____lbs.; Size/Dimensions: _____Reason for Shipment:_____

Package 2 of _____

Item	Detailed Description of Each Item (Include manufacturer, and if commercial product list url of manufacturer and item)	Identifying Numbers if known (Model, Serial, Property, RA, ECCN)	Weight	Declared Value
1				
2				
3				
4				
5				
6				

Total Weight _____lbs.; Size/Dimensions: _____Reason for Shipment:_____

Package 3 of _____

Item	Detailed Description of Each Item (Include manufacturer, and if commercial product list url of manufacturer and item)	Identifying Numbers if known (Model, Serial, Property, RA, ECCN)	Weight	Declared Value
1				
2				
3				
4				
5				
6				

Total Weight _____lbs.; Size/Dimensions: _____Reason for Shipment:_____

Package 4 of _____

Item	Detailed Description of Each Item (Include manufacturer, and if commercial product list url of manufacturer and item)	Identifying Numbers if known (Model, Serial, Property, RA, ECCN)	Weight	Declared Value
1				
2				
3				
4				
5				
6				

Total Weight _____lbs.; Size/Dimensions: _____Reason for Shipment:_____

Place containers to be shipped in the shipping area located outside Rm. 104. Attach this form to your shipment and alert Milo Lewis or Glenn Kerr (Room104) of your shipment needs.

SLAC Shipping & Receiving will open all boxes being shipped overseas. They may open or repack poorly packed domestic shipments as well. If you DO NOT want Shipping & Receiving to open your box, write: DO NOT OPEN per (your name) instructions on box.

_____   _____
Your Signature   Date