LETTER OF INTENT FOR VEHICLE EXPORTS
PORT OF SAVANNAH, GEORGIA

TO: ATTN: EXODUS TEAM Phone: (912) 721-4840 opt. 3
U.S. Customs and Border Protection Fax: (912) 721-4848
139 Southern Boulevard
Savannah, GA 31405

***Note: Additional Containers and/or Vehicles Maybe Listed on Additional Pages Following Format.***

Date: _________________________
The following are documents for the vehicles we have booked with our lines. The sailing and container information, including the location of the cargo has been listed below. If you need any further information please contact:

Container Number: ___________________________ Booking Number: _____________________________

POC Name: _________________________________ POC Company: ________________________________
**POC is Point of Contact

POC Phone#: _______________________________ POC Fax#: _________________________________

AES Number XTN: ___________________________ AES Number ITN: ___________________________

Shipping Line: _____________________________ SCAC CODE: _______________________________

Country of Final Destination: _______________ Vessel Name: _________________________________

Port of Departure: __________________________ Departure Date: ____________________________

Location of Cargo: _______________________________________________________________________

1. VIN# __________________________ Year/Make/Model: __________________________
2. VIN# __________________________ Year/Make/Model: __________________________
3. VIN# __________________________ Year/Make/Model: __________________________
4. VIN# __________________________ Year/Make/Model: __________________________
5. VIN# __________________________ Year/Make/Model: __________________________
6. VIN# __________________________ Year/Make/Model: __________________________
7. VIN# __________________________ Year/Make/Model: __________________________
8. VIN# __________________________ Year/Make/Model: __________________________
9. VIN# __________________________ Year/Make/Model: __________________________

Authorized Signature: ___________________________ Date Signed: _________________________

*POC is Point of Contact.