



Customs City ACI eManifest Fax/Email Request Form

Fax completed ACI Request Form to 1-888-279-4535.
 Email completed ACI Request Form to emanifest@customscity.com
 Telephone to speak to an agent 1-888-724-8914 x 1
www.customscity.com

COMPANY NAME _____ CONTACT NAME _____

CONTACT PHONE NUMBER _____ CONTACT FAX _____

Contact Email _____

Would you like us to email you a copy of the completed eManifest cover sheet?

Yes No

SPECIAL INSTRUCTIONS FOR CUSTOMS CITY: _____

Trip Section

TRIP # _____

Arrival Port _____

Arrival Date _____ Arrival Time _____

DRIVER _____

TEAM DRIVER (IF APPLICABLE) _____

Passenger (if applicable) _____

Truck # _____ Truck Plate _____ Province/State _____

Trailer # _____ Trailer Plate _____ Province/State _____

Seal # _____ Seal # _____ Seal # _____

ACI Shipment Exemptions (indicate the number of shipments below)

Courier Low-Value Shipment (LVS) _____ Postal Shipment _____

Instruments of International Traffic _____ Flying Truck _____

If LTL carrier continue to page 2 to enter more shipment details



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Shipment Section

Shipment Type =

- Regular Shipment (PARS)
 In Bond Shipment

Cargo Control Number: _____

Piece Count _____ UOM: _____

Weight: _____ LBS KG

Cargo Description: _____

In Bond Destination (n Bond Shipment) _____

Sublocation Code (Warehouse Code) (n Bond Shipment) _____

Importer BN# (Business Number) (CSA Shipment) _____

Consolidated Freight Indicator

- Yes No

(Would you like Customs City to forward your commercial documents to the customs broker?)

- Yes No

Customs Broker: _____ Customs Broker Phone Number: _____

Customs Broker Fax Number / E-mail: _____