

EXPORT INFORMATION SHEET (E . I . S)

*Please print this form completely & accurately

Date: / /

1-EXPORTER

Name : _____

Address : _____

No. Street Apt.

City Province Postal Code

Telephone no. : () - Fax: () -

Contact person: Position :

2- MANUFACTURER (If more than one attach a signed and stamped list)

Name : _____

Address : _____

No. Street Apt.

City Province Postal Code

Telephone no. : () - Fax: () -

Contact person: Position :

3- SAUDI AGENT OR DISTRIBUTOR

Name : _____

Address : _____

No. Street Apt.

City Province Postal Code

Telephone no. : () - Fax: () -

Contact person: Position :

4- IMPORTER TO SAUDI ARABIA (CONSIGNEE) / If different from the above

Name : _____

Address : _____

No. Street Apt.

City Province Postal Code

Telephone no. : () - Fax: () -

Contact person: Position :

5- FORWARDING AGENT (SHIPPER)

Name : _____

Address : _____

No. Street Apt.

City Province Postal Code

Telephone no. : () - Fax: () -

Contact person: Position :

Shipment date : Vessel or Airlines name _____

Port of loading : City : Country: _____

Port of destination in Saudi Arabia : _____

6- DESCRIPTION OF GOODS :

Brief description : Value in Canadian dollars : \$ -----

Weight : Country of origin : _____

• THIS CERTIFIES THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE .

PREPARED BY : _____

STAMP & SIGNATURE

TEL : (____) _____ - _____

CONSULAR SECTION, EMBASSY OF SAUDI ARABIA, 201 SUSSEX DRIVE, OTTAWA, ONTARIO, K1N 1K6