

MSC BOOKING FORM FOR LIBYA		
TO	MSC Booking Agency	

Booking party

BOOKING PARTY	FULL NAME	
	ADDRESS	
	PHONE NUMBER	
	WEBSITE	

Routing / Tracking

Place of Receipt (City / Country)	
Port of Loading (Port / Country)	
Port of Discharge (Port / Country)	
Place of Delivery (City / Country)	

Commodity

Full cargo description	HS CODE* (min. 6 digits)

** In accordance with the EU HS code and 1 HS code per commodity.*

Shipper

FULL NAME	
ADDRESS*	
PHONE NUMBER	
WEBSITE	

Consignee

FULL NAME	
ADDRESS*	
PHONE NUMBER	
WEBSITE	

Notify (if necessary)

FULL NAME	
ADDRESS*	
PHONE NUMBER	
WEBSITE	

Second Notify Party (if necessary)

FULL NAME	
ADDRESS	
PHONE NUMBER	
EMAIL	

Note to Agency: Please add any local requirements for booking, including as required by local law

I hereby certify that this booking satisfies the step-by-step procedure set out in the applicable MSC sanctions compliance procedure, including checks of the parties and cargo:

To be completed by Booking Agency	
Name and Position of undersigned	
Authorized Signature, Date and Stamp	