

Container Information:

Verified Gross Mass (VGM) Certification

****REQUIRED** - these fields must be filled out completely*

Shipper Information:

***Shipper Company Name:**

(full legal name)

(full legal name)

***Authorized VGM Contact:**

(first+last name)

(first+last name)

***Address 1:**

Address 2:

***City/State/Zip:**

***Country:**

***Telephone No:**

Fax

***Email:**

Carrier Booking Number:

MTA File Number:

Container Information:

Container Number

Container Tare Weight

Cargo Weight
(includes packing/dunnage)

Gross Container Weight
(container tare + cargo weight)

We hereby certify the weights as listed above to be true and accurate. We certify the scales used for weighing this shipment have been certified and inspected as required by local authorities. Verification available upon request.

We understand and confirm that missing, incorrect and / or late VGM information may result in non-acceptance of the shipment by the vessel operating ocean carrier and a delay in the originally planned schedule. Any additional cost caused by delay due to non-acceptance of the shipment by the carrier to be covered by VGM declaring party (as undersigned above).

***Authorized Signature:** _____

***Date:**

***Printed Name:**

***Title:**