

General Shipping Requisition

Updated - APRIL, 2023 Form received:

Service Preference: Fastest 🗖 | Cheaper 🗖 | Cheapest 🗍

ALL fields are mandatory unless otherwise specified.

PART A: TO/FROM INFORMATION AND DECLARATION

Please allow 3-5 business days for shipment processing. The clock starts after a completed form has been received AND approved by Stores. Please drop off before 11:00 am on the agreed to day.

Requested Ship date: ____

A1	Name										
ABOUT YOU	Declaration	As the person hand the contents provid my knowledge and CHECK IF YOU	led on this form, fully and accura	and any s	supplem	entary i	forms or em	ails, are true to the			
	Supervisor		Departr	nent							
	Phone			Email (u							
A2	Name										
ABOUT	Phone			Email (op	otional)						
THE	Address	Country / Territory		Organization			1				
RECIPIENT	(We cannot ship to a PO Box)	Address Line 1			Addr	ess Line	2		-		
OR ABOUT THE SENDER IF INCOMING ON OUR		Address Line 3			City				Check here if this is a personal		
		Postal Code / Zip		Notos					residence		
		Province / State		Notes							
A3	If the destination is in t	If the destination is in the European Union, N. Ireland, Norway, or Switzerland provide the EORI number of the recipient									

PART B: CHEMICALS AND KITS

B1	Does it contain chemicals or kits, including buffers and solvents?	Yes Continue to question B2	Skip to Part C →					
B2	Is the destination in the USA?	Yes T Fill out a <u>TSCA form</u> , continue	No Continue to B3					
D 2	Are the chemicals commercially	Yes ☐ Fill out Table B4 and continue to Part C → Supply a Safety Data Sheet (SDS) for each chemical listed in Table B4						
B3	available?	No Fill out the Research Samples Checklist Do not fill out Table B4. Continue to Part C \rightarrow and submit the RS Checklist with this form.						

TABLE B4 Commercially-available chemicals and kits included in the shipment

Chemical Name	Vendor	Catalogue Number	Country of Origin	Mass/Volume per container	Mass/Volume TOTAL

PART C: EQUIPMENT

C1	Does it contain equipment?	Yes 🗖 Continue to C2, then C3	No \square Skip to Part D \rightarrow
C2	Description of the equipment		
C3	Is it leaving Canada?	Yes 🗖 Continue to C4, then C5	No □ Skip to C7 →

PART C: EQUIPMENT (Cont'd)

	•												
	Export information	Recipient's Tax ID	Vo.	Country of Manufacture									
~	The Customs Value is generally	HS Tariff Classif'n.	Code(s).										
C4	considered to be the market value in Canadian dollars when the	Serial Number(s)											
	products/goods were new	Customs Value(s) i	n CAD										
C5	Is it for repair and will return?	Yes 🗖 Continu	ie to C6	No	3 Skip to C7 –	>							
C6	Is the repair under warranty?	Yes 🗖 No 🗆	es 🔲 No 🗍 Regardless, continue to C7										
		Only one 🔲 Ple	Only one Please allow at least 5 business days for shipment processing										
C7	How many unique items/pieces of equipment are included?	Multiple 🗖 🗛 n	Multiple A minimum of 3 weeks' notice is required. Provide a detailed packing list using this template										
		Continue to C8											
C8	Does it contain batteries?	Yes 🗖 Continu	ie to C9 ,	then g	o to PART D	No [J Skip to	PART	D→				
CO		Lithium Ion 🗖	No. of pack	ks	No. of cells/pack		Wh per cell		Wh per pack		Others		
C9	Battery information	Lithium Metal 🗖 No. of po		ks	No. of cells/pack		Wh per cell		Wh per pack				

PART D: CONTAINERS, BIOLOGICAL SUBSTANCES, AND OTHER ITEMS

 Description for any goods and items not already described above. If the destination is outside of Canada, please provide a HS Tariff code for each item. See our <u>shipping page</u> for more information on what information is require for different kinds of shipments 																		
					Mass	or volume o	of goods pe	r conta	iner			Total mass	or volume of	goods				
D2	Container in	fo	All caps mu	ist be tap	oed or po	arafilmed	Plastic 🗖	Glass	Volu	ume of	f Containe	ers (mL)		No. of Co	ntainers			
D3	D3 Is it a biological sample? Yes D Proceed th				eed th	rough ste	eps D4 to I	06 as requ	iired, t	hen D	07 No	🗖 Skip	o to D9 →					
D4	Sequencing	No. of Rxn	ns	D5	Cultu	res Type	Agar 🗖	Slant 🗖	Liquid		Stab 🗖	Other	Describe					
D6 Animal or plant samples Country of Origin				gin			Binomial I	Name										
D7	D7 Animal derived and to USA? Yes Provide US				ide <u>US</u>	SDA Category No. and continue to D8									No	Go to D8 →		
D8 Is it infectious? Yes Provide Bio				osafety Level and continue to D9						Νο	Go to D9 -	>						
				e permit a	permit as a PDF and continue to PART E No \Box Continue to PART E \rightarrow													

PART E: REGULATORY AND HANDLING

E1	Is the shipment perishable -	No, shipping ambient	Dry ice, amount in kg	just blue ice packs							
	requiring blue ice or dry ice?	\Box Dry shipper \rightarrow Conta	Dry shipper \rightarrow Contact <u>scistore@uvic.ca</u> for a declaration form								
E2	Do you want to insure the con There is a \$500 deductible and the pr		Yes D Provide ins. value in CAL		No □ Go to E3 →						
E3	Special Handling Notes										

PART F: SHIPPING CHARGE AUTHORIZATION

F1	Provide both the Stores short code and the FAST codes if a UVic account holder is paying	Stores Code	FAST Code	FUND 5 digits	-	ORGN 5 digits	-7278
F2	Provide the other party's FedEx account if they are paying	se write "R".					
F3	If submitting by email, please type "I approve" in the bod email with the form attached. Otherwise, physically sign right.	, ,					

Note: If/when we classify your shipment as fully regulated dangerous goods, additional fees of \$75 (FedEx) and ~\$25 (Stores, for paperwork generation) could be charged.