

# THE NATIONAL WOMENS SHOW

Appointed by:

Ottawa EY Centre  
October 18 - 19, 2025



## **Customs Clearance & Transportation Services**

Cross Connect Customs and Events Logistics Inc. ("Cross Connect") has been appointed by National Event Management as the Official Customs Broker & Transportation Provider for all shipments originating outside of Canada. Please read these instructions in conjunction with the exhibitor's manual provided by the Show Organizer.

These instructions will assist you in preparing for the correct, and timely, dispatch of your shipments; both to and from the event. Cross Connect is pleased to offer a complete logistics package that includes transportation/freight forwarding, customs clearance, delivery, and re-exportation services.

**Cross Connect** will provide the following services:

- On-site service from the first move-in day to the last day of move-out
- Transportation / Freight Forwarding and Advance Warehousing
- Post all securities and bonds with Canadian Border Services Agency
- Prepare the proper Customs entries to account for any sales you may make & remit the payments to Customs
- Prepare return export documents, bills of lading, shipping labels, and provide U.S. Customs Clearance, when required.

*For more information, please contact:*

**Pat D'Alessandro**

Phone: 416-726-7229

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

**Kyle Mekhuri**

Phone: 647-470-4763

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**Anthony D'Alessandro**

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The National Womens Show - Ottawa has been granted "official recognition status" by Canada Border Services Agency (Canada Customs) allowing certain privileges for event materials entering Canada. Using the official Customs Broker will eliminate the possibility of materials being held at the border by Canada Customs due to improper or insufficient documentation. We will assist all Exhibitors with their temporary imports, permanent entries, export of exhibit materials, and ensure that all qualifying "official recognition status" privileges are applied.

PLEASE NOTE: Failure to comply with the deadlines, consignee, and document instructions, will cause unnecessary delays and may lead to additional charges. For this reason, if you will be using a Freight Forwarder or Customs Broker, other than Cross Connect, please be sure to pass these instructions on to them. Exhibitors using their own Customs Broker will have to arrange their own bond or cash deposit with Canada Customs at the point of entry into Canada.

### **Consignment Instructions**

#### **ADVANCE WAREHOUSE:**

The warehouse will start receiving freight 30 days prior to the event from 9am to 3pm, Monday to Friday.

Advance warehouse services include delivery to show site only. MATERIAL HANDLING SERVICES AND CHARGES ARE NOT INCLUDED.

Advance warehouse services are not provided at the conclusion of the event. Your carrier MUST pick up your materials directly from show site during the scheduled move-out time.

Price: \$52.00 PER 100 LBS (400 LBS MINIMUM CHARGE)\*

\*This price is per shipment/waybill delivery.

**For delivery to the Advance Warehouse, consign your shipment to:**

**Exhibitor Name, Booth #  
c/o The National Womens Show - Ottawa  
555 Autoroute 13,  
Laval Quebec,  
H7W 5N4**

#### **DIRECT TO SHOW SITE:**

Shipments delivered direct to show site will only be accepted during scheduled move-in dates and times. Shipments arriving early or late will not be accepted.

**For delivery Direct to Show Site, consign your shipment to:**

**Exhibitor Name, Booth #  
c/o The National Womens Show - Ottawa  
EY Centre  
4899 Uplands Drive  
Ottawa Ontario,  
K1V 2N6**

## Shipping Checklist

### **\*\*PRIVATE VEHICLE SHIPMENTS / DRIVING ACROSS THE BORDER:**

If you intend to bring your goods across the border in a private vehicle (personal, company, or rental), there are documents that must accompany the individual carrying the materials. Please contact Cross Connect at least 1 week in advance of your expected crossing.

- ☐ Complete required forms below & send them to Cross Connect via e-mail.
- ☐ Schedule your pick-up (if not arranging transportation through Cross Connect).
  - We strongly suggest that exhibitors **DO NOT** ship by parcel courier, or by mail. Please contact Cross Connect for advice on how best to handle these types of shipments.
  - Goods being shipped need to abide by the following timelines:
    - o **TRUCK / COMMON CARRIER:** scheduled to arrive 1 week prior to show opening
    - o **AIRFREIGHT:** scheduled to arrive 3 days (minimum) prior to show opening
    - o **VAN LINE:** Shipments may be sent direct to show site and should be scheduled for delivery on the appropriate move-in day.
  - All shipments **MUST BE SENT PREPAID**. Cross Connect will not accept any collect freight charges. Shipments sent collect will be refused.
- ☐ Label your freight.
  - All pieces must be labeled clearly; showing the Exhibitor Name & Booth # c/o Show Name and the address where the freight is going, piece # and total # of pieces (e.g. piece 1 of 3), emergency contact information, and **"NOTIFY CROSS CONNECT FOR CUSTOMS CLEARANCE"**.
  - For freight on skids/pallets, if possible, we recommend that a label be placed on each individual carton, case, etc. and that any large pieces have labels placed on multiple sides.
  - Ensure that any previous shipping labels (used for past shipments) have been removed / destroyed.
- ☐ Ship your goods, ensuring that the appropriate documents have been provided to the carrier.
  - ☐ The Bill of Lading or Air Waybill, all Customs documents, and labels must be marked **"NOTIFY CROSS CONNECT FOR CUSTOMS CLEARANCE"**.
  - ☐ A copy of the Commercial Invoice must be attached to the Bill of Lading or Air Waybill.
- ☐ On show site:
  - The show site has been declared a bonded area for the entire event. Under **NO** circumstances are any goods to be removed without prior consent of Cross Connect.
  - Cross Connect can provide the following services:
    - o Return of goods to your stated destination
    - o Supply required shipping documents, export documents, and labels
    - o Arrange Customs clearance of any goods remaining in Canada; applicable duties and taxes must be paid prior to removal from the show site.
    - o Arrange transfer of goods to be displayed at another event in Canada
  - **NOTE:** Cross Connect is not responsible for lost, stolen, or damaged freight. All goods should be insured for the entire duration of the event; prior to, during, and after. Please contact Cross Connect for more information on cargo insurance.

## **SHIPPING FOOD SAMPLES TO CANADA FOR THE SHOW**

The **Canadian Food Inspection Agency (CFIA) – Safe Food For Canadians Regulations (SFCR)** generally allows food samples (with some exceptions), to enter Canada for use/distribution at trade show without a Safe Food For Canadians License, but only under the following conditions:

- **Total shipment weight** must be 100 kilograms (kgs) or less; or
- In the case of eggs, the **case count must be five or fewer cases, containing 30 dozen eggs or less per case**

### **PLEASE NOTE:**

If your shipment does not meet the conditions listed above, a SAFE FOOD FOR CANADIANS LICENSE is required.

If your food samples are included in a shipment along with your exhibit materials, advertising literature etc., the entire shipment cannot weigh more than 100 kgs total, otherwise your exhibit materials will need to be sent to Canada as a separate shipment.

Multiple small shipments (weighing 100 kg or less) of the same/similar food items will be refused. The term “same/similar” is determined by HS Code/HTS Number, and not by different flavors, packaging types, etc.

Although the CFIA and Department of Foreign Affairs and International Trade (DFAIT) offer many exemptions for food samples entering Canada for use/distribution at trade shows, meeting the conditions listed above does not mean that your shipment will be exempt from ALL import licenses/permits. The exemptions offered are dependent on a number of factors specific to your shipment (i.e. type of food, ingredients, country of origin, where it's shipping from, packaging, etc.). Because of this, it is imperative that your commercial invoice and packing list are reviewed and approved by Cross Connect prior to shipping. Please do not assume, that because your shipment weighs less than 100 kg, you are safe to ship.

### **IMPORTANT ACTIONS AND INFO:**

- Two weeks prior to shipping, complete the Commercial Invoice and Packing List (included in this kit) and submit to Cross Connect Customs & Event Logistics for review and approval. Email address: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

**!!! Failure to obtain prior approval from Cross Connect within the above time limit, could result in additional fees and/or your shipment being refused entry/clearance into Canada !!!**

## **Form Checklist**

- ☐ **Customs & Transportation Services Order Form (Mandatory)**
  - Please ensure that all fields, including credit card information and client signature (at bottom of form), are completed.
  - Note: IRS# (U.S. Tax ID, or E.I.N.) is required if goods will be returning to the USA.
  - Example and form for completion are included in this kit.
- ☐ **Commercial Invoice / Packing List (Mandatory)**
  - Complete all required information per example provided.
  - All invoices **MUST** include quantity, detailed descriptions (using general terms), countries of origin (manufacture – not purchase), and values for all items in the shipment.
  - For shipments that include electronics, please also provide the brand name and model # for each item in the description.
  - Example and form for completion are included in this kit.
- ☐ **Additional Forms (May be required)**
  - Additional information may be required if you are shipping goods that are regulated by the Government of Canada and/or by the U.S. Government (e.g. food, medical devices, cosmetics, electronics, etc.).
  - Be sure to e-mail your documents to Cross Connect prior to shipping, so that we can advise you if any additional information is required.

**\*\*NOTE:** All forms must be completed and returned to Cross Connect for review, prior to shipping. Failure to do so could result in additional fees and/or your shipment being refused clearance/entry into Canada.



**CROSSCONNECT**  
CUSTOMS & EVENT LOGISTICS

## !!! ATTENTION !!!

The Customs & Transportation Services Order Form is a legally required document. It must be completed and signed by the importer/owner before Customs Brokerage or Transportation Services are provided. When completing the form, please pay close attention to the following:

- **Wet (ink on paper) signatures are required.** Digital or Font-based signatures are not allowed.
- Company names must be the full/complete LEGAL business name, as registered with the Government in the country of operation.
- IRS#/U.S. Tax ID/EIN must be provided for all U.S. companies. Please attach a copy of the company W-9.
- GST/HST# must be provided for all Canadian companies.

**E-MAIL: [INFO@CROSSCONNECTCL.COM](mailto:INFO@CROSSCONNECTCL.COM)**  
**TEL: 416-639-2176**  
**WEBSITE: [WWW.CROSSCONNECTCL.COM](http://WWW.CROSSCONNECTCL.COM)**

# Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 8001 Weston Road, Unit 2, Woodbridge, ON L4L 9C8; business number 709076475RM0002, a Customs Broker licensed under the Customs Act, to act as my true and lawful agent and attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. Assist to set up Client's CARM business account, and/or manage and administer Client's CARM account;
2. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released;
3. The transportation, warehousing, and distribution of such goods; and
4. Undertake, facilitate, assist with and/or perform such other business, tasks, duties, powers and authorities for which Client provides written instructions to Cross Connect at any time and from time to time.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☐ Continuous Authority granted



**CROSSCONNECT**

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

## THIS FORM MUST BE COMPLETED & SIGNED BY THE CLIENT\* (OWNER/IMPORTER).

\*For events (i.e. trade shows, conventions, etc.) where there is "no sale involved", the Transactional Owner of the Goods must complete this form\*

### Services Required (please check all that apply):

☐ Customs Clearance ☐ Transportation ☐ Advance Warehouse

Event & Exhibitor	Shipment Delivering to (please check one):	<input type="checkbox"/> Direct to Event/Show Site	<input type="checkbox"/> Advance Warehouse
	Exhibitor Name:	Booth #:	
	Event Name:	Event Dates: to	
	Facility/Venue Name:	U.S. IRS # (if applicable):	
	Facility/Venue Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	On-site Contact:	Cell #:
E-mail:			

Client* (Owner/Importer)	Legal Business / Entity Name (as registered):		
	Does this company have a Canadian Office? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Legal Address (as registered):		
	City:	State/Province:	Zip/Postal Code:
	Country:	Importer/GST# (if applicable):	U.S. IRS# (if applicable):
	Officer Name (Owner, Partner, Director or Signing Officer):		
	E-mail:		
	Contact Name (if different from above):		
E-Mail:			

Shipper	<input type="checkbox"/> Same as Client		
	Company Name:	U.S. IRS #:	
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	Contact Name:	Tel:
E-mail:			

Return Freight	<input type="checkbox"/> No Return Shipment <input type="checkbox"/> Same as Shipper <input type="checkbox"/> Same as Client		
	Company Name:	IRS/Importer #:	
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	Contact Name:	Tel:
E-mail:			

## PLEASE SEE ADDITIONAL PAGES FOR BILLING, PAYMENT, TRANSPORTATION & ADVANCE WAREHOUSING

### Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent pursuant to this General Agency Agreement/Power of Attorney ("GAA"). Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" ("CTC") as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/POST-CARM-CUSTOMS-STC.pdf>. Cross Connect performs its transportation services in the role of agent pursuant to its "Transportation Trading Conditions" ("TTC"), as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/STC-TRANSPORTATION-POST-CARM.pdf>. The parties hereby irrevocably and unconditionally attorn to the jurisdiction of the courts of the Province of Ontario and all courts competent to hear appeals therefrom. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits.

Notwithstanding any (a) other provision of this GAA, (b) provision of the CTC or TTC, or (c) delegation of authority in CARM, including to manage Client's CARM business account, in any circumstances howsoever and whenever arising, and regardless of whether The Company uses its own business number or Client's business number for importation/exportation, and regardless of who any Government Authority identifies as the importer, owner, or importer of record for any shipment, and regardless of any liability assessed by any Government Authority: Client expressly acknowledges and agrees that: (a) The Company shall not be liable for any error in judgment or for anything which it may do or refrain from doing or for any resulting direct, indirect, consequential, punitive or exemplary damage or loss caused by any act or omission, or the negligence of The Company or by an act of God or other act or cause beyond the reasonable control of The Company, even if The Company has been advised of the possibility of such damage or loss; and (b) The Company shall not be liable for any failure to provide the services which is a result of the operation of the applicable laws of Canada or any other country or a change in the policies of Canada Customs.

In the event of a breach or other failure by The Company to perform its obligations for which The Company is held liable, including, but not limited to, acts or omissions of The Company employees, agents and representatives providing services, the Client's sole remedy hereunder, whether in contract, tort or otherwise, shall, in any and all events, be limited to termination hereof and damages not to exceed CAD 1000 (One Thousand Canadian Dollars).

In no event shall The Company's obligation or liability hereunder extend to direct, indirect, punitive, special, incidental and consequential damages or losses the Client may suffer or incur in connection herewith, such as, but not limited to, loss of revenue or profits, damages or losses as a result of the Client's inability to fulfill obligations to third parties, injury to good will, claims of customers and the like, even if The Company has been advised or is otherwise aware of the possibility thereof, nor shall it extend to damages or losses the Client may suffer or incur as a result of claims, suits or other proceeding made or instituted against the Client by third parties.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws

### Client (Importer/Owner) Signature

**NOTE: Wet ink signature required – Digital signature NOT allowed**

I have read and agree to the terms of this contract and grant Cross Connect the authority to act on my behalf. I hereby certify that I have authority to transact business on behalf of The Client.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

### Cross Connect Internal Use Only

Notes: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_



# Transportation Quote Request

Shipper Information	Company:
	Address:
	City:
	State/Prov: Zip/Postal Code:
	Country:
	Contact: Tel:
	E-mail:
	Date Shipment Available for Pick-up:
	Operating Days (e.g. Monday - Friday):
	Operating Hours (e.g. 8 am - 4 pm):
Loading Dock Onsite? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Delivery Information	Exhibitor Name:
	Booth #:
	Event Name:
	Venue Name:
	Venue Address:
	City:
	State/Prov: Zip/Postal Code:
	Country:
	Contact: Cell #:
	E-Mail:
Must Deliver By (dd-mmm-yyy h:mm tt):	

Service Requirements	Requested Service: <input type="checkbox"/> Air <input type="checkbox"/> Truck <input type="checkbox"/> Other: _____
	Additional Requirements: <input type="checkbox"/> Lift Gate <input type="checkbox"/> Inside Pick-up <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> Weekend Delivery
	<input type="checkbox"/> Please include Cargo Insurance on the estimate/quote.
	Total Shipment Value*: _____ Currency: _____ *Detailed Commercial Invoice/Packing List, with values, <u>must</u> be provided.
<b>Cargo Insurance/Declared Value</b> This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.	

	# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)	Length	Width	Height		Per Piece	Total
Shipment/Freight Information		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
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		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
	Total Pieces						Total Weight:	

Notes	Notes/Additional Information:
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## Advance Warehouse Information: To be completed if Cross Connect is NOT booking your transportation

Shipment Info.	Shipped Via (Carrier/Courier Name):
	Carrier/Courier Service Type: <input type="checkbox"/> Air/Express <input type="checkbox"/> Ground
	Total # of Pieces: Total Weight (lbs):
	Tracking #'s:

- You are responsible for tracking your shipment to ensure timely arrival.
- Goods sent via Post or shipped C.O.D. will NOT be accepted for delivery.
- If you are shipping from outside of Canada, to avoid Customs Clearance delays, please ensure that you check the "Customs Clearance" box on the first page of this form and notify your Carrier/Courier that Cross Connect is your Customs Broker. Customs documents are required (please see your Exhibitor Manual).

Advance Warehouse Services include delivery to show site, but **DO NOT** include material handling services and charges. Your carrier must pick up your materials, directly from show site, at the end of the event.

The warehouse will start receiving freight 30 days prior to the event from 9 am to 3 pm, Monday to Friday.

Advance Warehouse Services are charged per delivery received. If you are shipping via courier, it is recommended that you ship on a single Waybill to avoid additional advance warehouse charges.



## Billing & Payment Information

Event & Exhibitor	Exhibitor Name:		Booth #:
	Event Name:		Event Dates: to
	Facility/Venue Name:		
	Facility Venue Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	On-site Contact:	Cell #:
	E-mail:		

Billing Information	Company Name:		
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:		
	Contact Name:		Tel:
	E-mail:		
	Second Contact Name (if applicable):		Tel:
	E-mail:		

Payment Information	<b>MUST BE COMPLETED</b> <b>*Delinquent accounts will be charged for all collection, legal and administration fees*</b>		
	Charge to: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
	Cardholder Name:		CVV Number:
	Credit Card Number:		Expiry Date: (mm/yyyy)
	I authorize use of this card for payment or pre-payment of services relative to this form. I understand that pre-payments on estimated amounts are subject to adjustment, and that this card will be charged for adjustments and/or future invoices generated for services not outlined on, or in addition to, any estimates provided.		
	I acknowledge that <b>declined credit cards are subject to a 30% surcharge</b> (minimum \$50.00 USD).		
	Cardholder Signature:		Date:

Remittance Information	Remit To:		
	HST/GST#:		
	Tel:		
	Attention:		
E-mail:			

# Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 8001 Weston Road, Unit 2, Woodbridge, ON L4L 9C8; business number 709076475RM0002, a Customs Broker licensed under the Customs Act, to act as my true and lawful agent and attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. Assist to set up Client's CARM business account, and/or manage and administer Client's CARM account;
2. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released;
3. The transportation, warehousing, and distribution of such goods; and
4. Undertake, facilitate, assist with and/or perform such other business, tasks, duties, powers and authorities for which Client provides written instructions to Cross Connect at any time and from time to time.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☒ Continuous Authority granted



**CROSSCONNECT**

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

## THIS FORM MUST BE COMPLETED & SIGNED BY THE CLIENT\* (OWNER/IMPORTER).

\*For events (i.e. trade shows, conventions, etc.) where there is "no sale involved", the Transactional Owner of the Goods must complete this form\*

### Services Required (please check all that apply):

☒ Customs Clearance ☒ Transportation ☒ Advance Warehouse

Event & Exhibitor	Shipment Delivering to (please check one):	<input type="checkbox"/> Direct to Event/Show Site	<input checked="" type="checkbox"/> Advance Warehouse
	Exhibitor Name: ABC COMPANY		Booth #: 1001
	Event Name: NAME OF THE EVENT/SHOW		Event Dates: 25-Oct-24 to 29-Oct-24
	Facility/Venue Name: THE EVENT FACILITY		U.S. IRS # (if applicable):
	Facility/Venue Address: 600 CONVENTION CENTRE DRIVE		
	City: TORONTO	State/Province: ON	Zip/Postal Code: M0X 0X0
	Country: CANADA	On-site Contact: JOHN SMITH	Cell #: 555-555-0000
E-mail: JSMITH@DOMAIN.COM			

Client* (Owner/Importer)	Legal Business / Entity Name (as registered): ABC COMPANY, INC.	
	Does this company have a Canadian Office? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Legal Address (as registered): 123 SOMEPLACE AVENUE, SUITE 3	
	City: NEW YORK	State/Province: NY
	Country: USA	Importer/GST# (if applicable): N/A
	Officer Name (Owner, Partner, Director or Signing Officer): JOHN SMITH	U.S. IRS# (if applicable): 12-3456789
	E-mail: JSMITH@DOMAIN.COM	Title: CEO
Contact Name (if different from above):	Tel: 555-555-0000	
E-Mail:	Tel:	

Shipper	<input checked="" type="checkbox"/> Same as Client	
	Company Name: ABC COMPANY, INC.	U.S. IRS #: 12-3456789
	Address: 123 SOMEPLACE AVENUE, SUITE 3	
	City: NEW YORK	State/Province: NY
	Country: USA	Zip/Postal Code: 10093
E-mail: JSMITH@DOMAIN.COM	Contact Name: JOHN SMITH	
	Tel: 555-555-0000	

Return Freight	<input type="checkbox"/> No Return Shipment <input type="checkbox"/> Same as Shipper <input checked="" type="checkbox"/> Same as Client	
	Company Name: ABC COMPANY, INC.	IRS/Importer #: 12-3456789
	Address: 123 SOMEPLACE AVENUE, SUITE 3	
	City: NEW YORK	State/Province: NY
	Country: USA	Zip/Postal Code: 10093
E-mail: JSMITH@DOMAIN.COM	Contact Name: JOHN SMITH	
	Tel: 555-555-0000	

## PLEASE SEE ADDITIONAL PAGES FOR BILLING, PAYMENT, TRANSPORTATION & ADVANCE WAREHOUSING

### Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent pursuant to this General Agency Agreement/Power of Attorney ("GAA"). Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" ("CTC") as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/POST-CARM-CUSTOMS-STC.pdf>. Cross Connect performs its transportation services in the role of agent pursuant to its "Transportation Trading Conditions" ("TTC"), as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/STC-TRANSPORTATION-POST-CARM.pdf>. The parties hereby irrevocably and unconditionally attorn to the jurisdiction of the courts of the Province of Ontario and all courts competent to hear appeals therefrom. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits.

Notwithstanding any (a) other provision of this GAA, (b) provision of the CTC or TTC, or (c) delegation of authority in CARM, including to manage Client's CARM business account, in any circumstances howsoever and whenever arising, and regardless of whether The Company uses its own business number or Client's business number for importation/exportation, and regardless of who any Government Authority identifies as the importer, owner, or importer of record for any shipment, and regardless of any liability assessed by any Government Authority: Client expressly acknowledges and agrees that: (a) The Company shall not be liable for any error in judgment or for anything which it may do or refrain from doing or for any resulting direct, indirect, consequential, punitive or exemplary damage or loss caused by any act or omission, or the negligence of The Company or by an act of God or other act or cause beyond the reasonable control of The Company, even if The Company has been advised of the possibility of such damage or loss; and (b) The Company shall not be liable for any failure to provide the services which is a result of the operation of the applicable laws of Canada or any other country or a change in the policies of Canada Customs.

In the event of a breach or other failure by The Company to perform its obligations for which The Company is held liable, including, but not limited to, acts or omissions of The Company employees, agents and representatives providing services, the Client's sole remedy hereunder, whether in contract, tort or otherwise, shall, in any and all events, be limited to termination hereof and damages not to exceed CAD 1000 (One Thousand Canadian Dollars).

In no event shall The Company's obligation or liability hereunder extend to direct, indirect, punitive, special, incidental and consequential damages or losses the Client may suffer or incur in connection herewith, such as, but not limited to, loss of revenue or profits, damages or losses as a result of the Client's inability to fulfill obligations to third parties, injury to good will, claims of customers and the like, even if The Company has been advised or is otherwise aware of the possibility thereof, nor shall it extend to damages or losses the Client may suffer or incur as a result of claims, suits or other proceeding made or instituted against the Client by third parties.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws

### Client (Importer/Owner) Signature

NOTE: Wet ink signature required – Digital signature NOT allowed

I have read and agree to the terms of this contract and grant Cross Connect the authority to act on my behalf. I hereby certify that I have authority to transact business on behalf of The Client.

Signature: *John Smith* Date: 30-Sep-24  
Printed Name: JOHN SMITH  
Title: CEO

### Cross Connect Internal Use Only

Notes:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

# Transportation Quote Request

Shipper Information	Company: ABC COMPANY, INC.	
	Address: 123 SOMEPLACE AVENUE, SUITE 3	
	City: NEW YORK	
	State/Prov: NY	Zip/Postal Code: 10093
	Country: USA	
	Contact: JOHN SMITH	Tel: 555-555-0000
	E-mail: JSMITH@DOMAIN.COM	
	Date Shipment Available for Pick-up: 04-Oct-2024	
Operating Days (e.g. Monday - Friday): Monday - Friday		
Operating Hours (e.g. 8 am - 4 pm): 9 am - 5 pm		
Loading Dock Onsite? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Delivery Information	Exhibitor Name: ABC COMPANY	
	Booth #: 1001	
	Event Name: NAME OF THE EVENT/SHOW	
	Venue Name: THE EVENT FACILITY	
	Venue Address: 600 CONVENTION CENTRE DRIVE	
	City: TORONTO	
	State/Prov: ON	Zip/Postal Code: M0X 0X0
	Country: CANADA	
	Contact: JOHN SMITH	Cell #: 555-555-0000
E-Mail: JSMITH@DOMAIN.COM		
Must Deliver By (dd-mmm-yyy h:mm tt): 28-Oct-2024 @ 10:00 am		

Service Requirements	Requested Service: <input type="checkbox"/> Air <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Other: _____
	Additional Requirements: <input type="checkbox"/> Lift Gate <input type="checkbox"/> Inside Pick-up <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> Weekend Delivery
	<input checked="" type="checkbox"/> Please include Cargo Insurance on the estimate/quote.
	Total Shipment Value*: 10,000.00 Currency: USD *Detailed Commercial Invoice/Packing List, with values, must be provided.
<b>Cargo Insurance/Declared Value</b> This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.	

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)		Length	Width	Height		Per Piece	Total
2	SKIDS	@ Dimensions (Inches) Each	48	48	48	@ Weight (lbs) Each	400	800
1	CRATE	@ Dimensions (Inches) Each	41	52	50	@ Weight (lbs) Each	1,000	1,000
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
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		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
3	Total Pieces						Total Weight:	1,800

Notes	Notes/Additional Information:
	PLEASE INCLUDE BLANKETS & STRAPS

## Advance Warehouse Information: To be completed if Cross Connect is NOT booking your transportation

Shipment Info.	Shipped Via (Carrier/Courier Name):	
	Carrier/Courier Service Type:	<input type="checkbox"/> Air/Express <input type="checkbox"/> Ground
	Total # of Pieces:	Total Weight (lbs):
	Tracking #'s:	

- You are responsible for tracking your shipment to ensure timely arrival.
- Goods sent via Post or shipped C.O.D. will NOT be accepted for delivery.
- If you are shipping from outside of Canada, to avoid Customs Clearance delays, please ensure that you check the "Customs Clearance" box on the first page of this form and notify your Carrier/Courier that Cross Connect is your Customs Broker. Customs documents are required (please see your Exhibitor Manual).

Advance Warehouse Services include delivery to show site, but **DO NOT** include material handling services and charges. Your carrier must pick up your materials, directly from show site, at the end of the event.

The warehouse will start receiving freight 30 days prior to the event from 9 am to 3 pm, Monday to Friday.

Advance Warehouse Services are charged per delivery received. If you are shipping via courier, it is recommended that you ship on a single Waybill to avoid additional advance warehouse charges.



## Billing & Payment Information

**CROSSCONNECT**

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

Event & Exhibitor	Exhibitor Name: ABC COMPANY	Booth #: 1001	
	Event Name: NAME OF THE EVENT/SHOW	Event Dates: 25-Oct-24 to 29-Oct-24	
	Facility/Venue Name: THE EVENT FACILITY		
	Facility Venue Address: 600 CONVENTION CENTRE DRIVE		
	City: TORONTO	State/Province: ON	Zip/Postal Code: M0X 0X0
	Country: CANADA	On-site Contact: JOHN SMITH	Cell #: 555-555-0000
	E-mail: JSMITH@DOMAIN.COM		

Billing Information	<input type="checkbox"/> Same as Shipper (page 1)	<input checked="" type="checkbox"/> Same as Client (page 1)	
	Company Name: ABC COMPANY, INC.		
	Address: 123 SOMEPLACE AVENUE, SUITE 3		
	City: NEW YORK	State/Province: NY	Zip/Postal Code: 10093
	Country: USA		
	Contact Name: JOHN SMITH	Tel: 555-555-0000	
	E-mail: JSMITH@DOMAIN.COM		
Second Contact Name (if applicable): SUSAN JONES	Tel: 555-555-1111		
E-mail: SJONES@DOMAIN.COM			

Payment Information	<b>MUST BE COMPLETED</b>			
	Charge to:	<input checked="" type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
	Cardholder Name: JOHN SMITH	CVV Number: 123		
	Credit Card Number: 1234 5678 9123 4567	Expiry Date: 11/2026	(mm/yyyy)	
	I authorize use of this card for payment or pre-payment of services relative to this form. I understand that pre-payments on estimated amounts are subject to adjustment, and that this card will be charged for adjustments and/or future invoices generated for services not outlined on, or in addition to, any estimates provided.			
	I acknowledge that <b>declined credit cards are subject to a 30% surcharge</b> (minimum \$50.00 USD).			
	Cardholder Signature: <i>John Smith</i>	Date: 30-Sep-2024		

Remittance Information	Remit To: Cross Connect Customs and Event Logistics Inc. 8001 Weston Road, Unit 2 Woodbridge, ON L4L 9C8
	HST/GST#: 709076475RT0001
	Tel: (416) 639-2176
	Attention: Accounting Department
	E-mail: <a href="mailto:payments@crossconnectcl.com">payments@crossconnectcl.com</a>

**CARRIER ONLY PARS E-mail: [pars@crossconnectcl.com](mailto:pars@crossconnectcl.com)**

HOURS: Mon-Fri 9 am - 5 pm \*E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

Shipper:			Consignee (Ship To):			Importer/Owner of Goods: <input type="checkbox"/> Same as Shipper  Does this company have a Canadian Office?						Shipped Via:					*REMARKS ("X" each item)  *A – TEMPORARY IMPORT *B – PERMANENT IMPORT *C – GIVEN AWAY / SOLD	
												Shipped To:		<input type="checkbox"/> Adv. Whse	<input type="checkbox"/> Show Site			
												IRS #:						
												Pieces:						
												Weight:		<input type="checkbox"/> kg	<input type="checkbox"/> lbs			
												Currency:						
												Ship Date:						
# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name &amp; Model # for all electronic equipment.</small>	Origin	Weight in _____ (lbs/kg)	Dimensions (Inches) L    W    H			CBM	HTS	Remarks*			Value				
A TEMP	B PERM	C PROMO	Unit Value	Total Value														

**FOB VALUE:	
INSURANCE:	
FREIGHT CHARGE:	
<b>**TOTAL CIF VALUE:</b>	

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf). The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

12/22

# COMMERCIAL INVOICE / PACKING LIST



**CROSSCONNECT**  
CUSTOMS & EVENT LOGISTICS

NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.  
HOURS: Mon-Fri 9 am - 5 pm \*E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

**\*IMPORTANT:**  
**MUST be completed in full.**

<b>Shipper:</b> ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093  JOHN SMITH - 555-555-0000	<b>Consignee (Ship To):</b> ABC COMPANY, BOOTH # 1001 C/O NAME OF SHOW/EVENT VENUE NAME VENUE ADDRESS  ONSITE CONTACT NAME & CELL PHONE #	<b>Importer/Owner of Goods:</b> <input checked="" type="checkbox"/> Same as Shipper ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093  JOHN SMITH - 555-555-0000  Does this company have a Canadian Office? No	<b>Shipped Via:</b> TRANSPORTATION COMPANY NAME <b>Shipped To:</b> <input checked="" type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site <b>IRS #:</b> 12-3456789 <b>Pieces:</b> 3 <b>Weight:</b> 1,800 <input type="checkbox"/> kg <input checked="" type="checkbox"/> lbs <b>Currency:</b> USD <b>Ship Date:</b> 06/15/2021 (mm/dd/yyyy)	<b>*REMARKS</b> ("X" each item)  *A - TEMPORARY IMPORT *B - PERMANENT IMPORT *C - GIVEN AWAY / SOLD
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# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name &amp; Model # for all electronic equipment.</small>	Origin	Weight in lbs (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value
1	SKID	1	DISPLAY BOOTH	USA	400	48	48	48	1.81	9403.20	X			5,250.00	5,250.00
1	CRATE	2	50" LED TV'S - LG MODEL# 55EG9100	CHINA	50	41	52	50	1.75	8528.72	X			700.00	1,400.00
		2	WEIGHTED METAL TV STANDS	JAPAN	950					9403.20	X			500.00	1,000.00
1	SKID	5000	ADVERTISING LITERATURE	USA	200	48	48	48	1.81	4911.10			X	0.15	750.00
		1000	BALL POINT PENS	CHINA	48					9608.10			X	0.35	350.00
		400	CATALOGS	USA	150					4911.10			X	3.00	1,200.00
		2	POSTERS	USA	2					4911.91		X		25.00	50.00

**\*Electronic equipment MUST include Brand Name & Model #.**

**\*Each commodity MUST be listed on its own line; DO NOT group items.**

**\*Specific descriptions required; Vague descriptions such as "Give Aways", "Display Materials", or "Trade Show Samples" will NOT be accepted.**

**\*Values need to reflect the cost of goods (price paid), or the selling price of the goods (price payable); whichever is greater.**

**\*\$0 values will NOT be accepted.**

**\*Indicate the Country of Manufacture (where the goods are made); NOT the country of purchase.**

\*\*FOB (Free On Board) VALUE: indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

\*\*CIF (Cost, Insurance, and Freight) VALUE: indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

**FOB VALUE:	10,000.00
INSURANCE:	
FREIGHT CHARGE:	
**TOTAL CIF VALUE:	10,000.00

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf). The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE: 7,650.00

PERMANENT IMPORT VALUE: 2,350.00

Signature: John Smith

Date: 06/10/2021