

Instructions for International Airbill Entry with Pilot Freight Services

1. Log in to CoPilot and choose **SHIP** (a new blank airbill will appear).
2. Make sure the **Shipper** and **Third Party** (if needed) are correct.

Pilot Station : **PHL**

Click to Hide Party Information..

Shipper/Consignee <input type="button" value="Third Party"/>	
Shipper Address Book <input type="button" value="PILOT CORPORATE 2"/> <input type="button" value="Save"/>	
Company Name <input type="text" value="XYZ Corp"/> Attention <input type="text" value="Chris Milon"/> Phone # <input type="text" value="(610)891-8101"/> Ext <input type="text" value="xxxx"/> Street Address <input type="text" value="314 N. MIDDLETON ROAD"/> City <input type="text" value="LIMA"/> State <input type="text" value="PENNSYLVANIA"/> <input type="button" value=""/>	
Postal Code <input type="text" value="19037"/> Country <input type="text" value="UNITED STATES"/> <input type="button" value=""/> Email Address <input type="text" value="cmilon@pilotdelivers.com"/> <input checked="" type="checkbox"/> Send Email <input type="checkbox"/> Email Label and HAWB Document Enter your email addresses separated by commas	
Consignee Address Book <input type="button" value="- SELECT -"/> <input type="button" value="Save"/>	
Company Name <input type="text"/> Attention <input type="text"/> Phone # <input type="text"/> Ext <input type="text"/> Street Address <input type="text"/> City <input type="text"/> State <input type="text" value="ALABAMA"/> <input type="button" value=""/> Postal Code <input type="text"/> Country <input type="text" value="UNITED STATES"/> <input type="button" value=""/> Email Address <input type="text"/> <input checked="" type="checkbox"/> Send Email	
Shipper Reference Number: <input type="text"/> Consignee Reference Number: <input type="text"/> NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.	
Click to Hide Services..	
Ship Date <input type="text" value="06/02/2014"/> <input type="button" value=""/> Ready Time <input type="text" value="14:00"/> <input type="button" value=""/> Service: <input type="text" value="FIRST FLIGHT SERVICE"/> <input type="button" value=""/> Payment Type: <input type="text" value="THIRD PARTY"/> <input type="button" value=""/> Close Time <input type="text" value="17:00"/> <input type="button" value=""/> <input type="checkbox"/> Swap Exchange	
Special Instructions <input type="text"/>	
I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation. <input checked="" type="radio"/> Yes <input type="radio"/> No	

3. Enter Consignee information (the shipment converts to an International Shipment when the consignee country is changed to a foreign country).

Pilot Station : **PHL** **Validate** **Save as Draft** **Submit**

Click to Hide Party Information..

Shipper/Consignee Third Party	Consignee - SELECT -
Shipper Address Book <input type="text" value="PILOT CORPORATE 2"/> <input type="checkbox"/> Save Company Name <input type="text" value="XYZ Corp"/> Attention <input type="text" value="Chris Milon"/> Phone # <input type="text" value="(610)891-8101"/> Ext <input type="text" value="xxxx"/> Street Address <input type="text" value="314 N. MIDDLETON ROAD"/> City <input type="text" value="LIMA"/> State <input type="text" value="PENNSYLVANIA"/> <input type="checkbox"/> Postal Code <input type="text" value="19037"/> Country <input type="text" value="UNITED STATES"/> <input type="checkbox"/> Email Address <input type="text" value="cmilon@pilotdelivers.com"/> <input type="checkbox"/> Send Email <input type="checkbox"/> Email Label and HAWB Document	Consignee Address Book <input type="text" value="- SELECT -"/> <input type="checkbox"/> Save Company Name <input type="text" value="ACME Inc."/> Attention <input type="text" value="John Smith"/> Phone # <input type="text" value="+44 17651234"/> Ext <input type="text" value="XXX"/> Street Address <input type="text" value="100 Buckingham Court"/> City <input type="text" value=""/> State <input type="text" value=""/> <input type="checkbox"/> Postal Code <input type="text" value=""/> Country <input type="text" value="UNITED KINGDOM"/> <input type="checkbox"/> Email Address <input type="text" value="UNITED ARAB EMIRATES"/> <input type="checkbox"/> <input type="checkbox"/> Consignee Reference Number: <input type="text" value=""/> NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.

Click to Hide Services..

Ship Date <input type="text" value="06/02/2014"/> <input type="checkbox"/> Ready Time <input type="text" value="14:00"/> <input type="checkbox"/> Service: <input type="text" value=""/> <input type="checkbox"/>	Payment Type: <input type="text" value="THIRD PARTY"/> <input type="checkbox"/> Close Time <input type="text" value="17:00"/> <input type="checkbox"/> <input type="checkbox"/> Swap Exchange
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Special Instructions

I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Yes No

4. Enter Shipper/Consignee Reference Numbers

NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.

Pilot Station : PHL

Click to Hide Party Information..

Shipper/Consignee		Third Party	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Shipper Address Book <input type="button" value="PILOT CORPORATE 2"/> <input type="checkbox" value="Save"/> Company Name <input type="text" value="XYZ Corp"/> Attention <input type="text" value="Chris Milon"/> Phone # <input type="text" value="(610)891-8101"/> Ext <input type="text" value="xxxx"/> Street Address <input type="text" value="314 N. MIDDLETON ROAD"/> City <input type="text" value="LIMA"/> State <input type="text" value="PENNSYLVANIA"/> <input type="checkbox" value="Save"/> Postal Code <input type="text" value="19037"/> Country <input type="text" value="UNITED STATES"/> <input type="checkbox" value="Save"/> Email Address <input type="text" value="cmilon@pilotdelivers.com"/> <input checked="" type="checkbox" value="Send Email"/> <input checked="" type="checkbox" value="Email Label and HAWB Document"/> </div> <div style="width: 45%;"> Consignee Address Book <input type="button" value="- SELECT -"/> <input type="checkbox" value="Save"/> Company Name <input type="text" value="ACME Inc."/> Attention <input type="text" value="John Smith"/> Phone # <input type="text" value="+44 17651234"/> Ext <input type="text" value="XXX"/> Street Address <input type="text" value="100 Buckingham Court"/> City <input type="text" value=""/> State <input type="text" value=""/> <input type="checkbox" value="Save"/> Postal Code <input type="text" value=""/> Country <input type="text" value="UNITED KINGDOM"/> <input type="checkbox" value="Save"/> Email Address <input type="text" value="johnsmith@acmeinc.com"/> <input checked="" type="checkbox" value="Send Email"/> </div> </div>			
Enter your email addresses separated by commas			
Shipper Reference Number: <div style="border: 1px solid #ccc; padding: 5px; height: 100px; width: 100%;"> Shipper Reference 1 Shipper Reference 2 Shipper Reference 3 </div>		Consignee Reference Number: <div style="border: 1px solid #ccc; padding: 5px; height: 100px; width: 100%;"> Consignee Reference 1 Consignee Reference 2 Consignee Reference 3 </div>	
One or more of the reference lines are more than 30 characters and will be truncated if saved or submitted.			
NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.			

Click to Hide Services..

Ship Date	<input type="text" value="06/02/2014"/>	Payment Type:	<input type="button" value="THIRD PARTY"/>
Ready Time	<input type="text" value="14:00"/>	Close Time	<input type="text" value="17:00"/>
Service:	<input type="checkbox" value="Swap Exchange"/>		

Special Instructions

I consent to screening of any cargo moving air transportation. Failure to provide this consent in

5. Confirm the (Ship) Date, Ready Time, Payment Type, and Close Time are correct.

Pilot Station : **PHL**

[Click to Hide Party Information..](#)

<input type="button" value="Shipper/Consignee"/> <input type="button" value="Third Party"/>	
Shipper Address Book <input type="button" value="PILOT CORPORATE 2"/> <input type="checkbox" value="Save"/>	
Company Name <input type="text" value="PILOT AIR FREIGHT"/> Attention <input type="text" value="MIKE MILLER"/> Phone # <input type="text" value="(610)891-8101"/> Ext <input type="text" value="8142"/> Street Address <input type="text" value="314 N. MIDDLETOWN ROAD"/> <input type="text" value="C/O"/> <input type="text" value=""/> City <input type="text" value="LIMA"/> State <input type="button" value="PENNSYLVANIA"/> <input type="checkbox" value="Send Email"/> <input type="checkbox" value="Email Label and HAWB Document"/>	
Consignee Address Book <input type="button" value="- SELECT -"/> <input type="checkbox" value="Save"/>	
Company Name <input type="text" value="ACME Inc"/> Attention <input type="text" value="John Smith"/> Phone # <input type="text" value="+44 1758 169"/> Ext <input type="text" value="XXX"/> Street Address <input type="text" value="100 Buckingham Court"/> <input type="text" value=""/> City <input type="text" value="London"/> State <input type="button" value=""/> Postal Code <input type="button" value=""/> Country <input type="button" value="UNITED KINGDOM"/> <input type="checkbox" value="Send Email"/>	
Email Address <input type="text" value="johnsmith@acmeinc.com"/> <input type="checkbox" value="Send Email"/> <input type="checkbox" value="Email Label and HAWB Document"/> Enter your email addresses separated by commas	
Shipper Reference Number: <input type="text" value="Shipment Reference 1"/> <input type="text" value="Shipment Reference 2"/> <input type="text" value="Shipment Reference 3"/>	
Consignee Reference Number: <input type="text" value="Consignee Reference 1"/> <input type="text" value="Consignee Reference 2"/> <input type="text" value="Consignee Reference 3"/>	
NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.	

[Click to Hide Services..](#)

Ship Date <input type="text" value="06/02/2014"/>	Payment Type: <input type="button" value="THIRD PARTY"/>
Ready Time <input type="text" value="14:00"/>	Close Time <input type="text" value="17:00"/>
Service: <input type="button" value="- SELECT -"/>	<input type="checkbox" value="Swap Exchange"/>

Special Instructions

<input type="checkbox" value="Yes"/> <input type="checkbox" value="No"/>
I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Note: Service option is not available for International Shipments. Refer to section title "Edit International Information" to select the service associate with International.

6. Complete the following items:

- a. **Special Instructions** if more information needs to be instructed to Pilot Freight Services
- b. **Acknowledge the Consent to Screening** in order for your shipment to move via air transportation
- c. **Indicate all Hazardous Materials** included in the shipment

City	LIMA		City	London	
State	PENNSYLVANIA		State		
Postal Code	19037		Postal Code		
Country	UNITED STATES		Country	UNITED KINGDOM	
Email Address	MMILLER@PILOTDELIVERS.COM		Email Address	johnsmith@acmeinc.com	
<input checked="" type="checkbox"/> Send Email <input type="checkbox"/> Email Label and HAWB Document		Enter your email addresses separated by commas			
Shipper Reference Number: Shipment Reference 1 Shipment Reference 2 Shipment Reference 3			Consignee Reference Number: Consignee Reference 1 Consignee Reference 2 Consignee Reference 3		
NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.					
Click to Hide Services..					
Ship Date	06/02/2014	Payment Type:	THIRD PARTY		
Ready Time	14:00	Close Time	17:00		
Service:	- SELECT -	<input type="checkbox"/> Swap Exchange			
Special Instructions					
<p>I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>					
Hazardous Materials	<input type="checkbox"/> Hazardous Materials	24 Hr. Contact Phone#:			
Class:	<input type="text"/>	UN#:	<input type="text"/>	Hazmat	<input type="checkbox"/>
Click to Hide Line Items..					
Enter Product #:		<input type="text"/>	Catalog	X Quantity	<input type="text"/>
Pieces	Description	<input type="text"/>	Weight	Weight(kg)	Length
Weight	<input type="text"/>	Length	<input type="text"/>	Width	<input type="text"/>
Width	<input type="text"/>	Height	<input type="text"/>	#	<input type="text"/>
No data to display					
Total: 0		Total: 0		Total: 0	
Click to Hide Extended Services..					
Tariff Name	<input type="text"/>				
Navigator Quote Number	<input type="text"/>				
Extended Services :					
Attempted PU/Del	<input type="checkbox"/>	Shipper	<input type="checkbox"/>	Consignee	<input type="checkbox"/>

7. If you have a Products Catalog, select an item from the catalog by clicking the Catalog button or by typing the Product # and Quantity and then select Load Product button.

Note: You should see the line item listed on your waybill when this is done.

NOTE: Entering multiple reference numbers is allowed, please enter one number on each line.

Click to Hide Services..

Ship Date	06/02/2014	Payment Type:	THIRD PARTY
Ready Time	14:00	Close Time	17:00
Service:	- SELECT -	<input type="checkbox"/> Swap Exchange	

Special Instructions

I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Yes No

Hazardous Materials	<input type="checkbox"/> Hazardous Materials	24 Hr. Contact Phone#:	<input type="text"/>
Class:	<input type="text"/>	UN#:	<input type="text"/>
Hazmat			

Click to Hide Line Items..

Enter Product #:	<input type="text"/>	Catalog	X Quantity	<input type="text"/>	Load Product		
Pieces	Description	Weight	Weight(kg)	Length	Width	Height	Add
Pieces	Description	Weight (lbs)	Weight (kg)	Length (in)	Width (in)	Height (in)	#
No data to display							
Total: 0	Total: 0	Total: 0					

Click to Hide Extended Services..

Tariff Name	<input type="text"/> -SELECT-						
Navigator Quote Number	<input type="text"/>						
Extended Services :							
Attempted PU/Del	Shipper		Consignee				
Hotel/Convention	<input type="radio"/> Hotel	<input type="radio"/> Conv	<input checked="" type="radio"/> None	<input type="radio"/> Hotel	<input type="radio"/> Conv	<input checked="" type="radio"/> None	
Inside PU/Del	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Liftgate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Private Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wait Time (Hrs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Two Man PU/Del (Hrs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Special PU/Del	<input type="text"/> -None-	<input type="text"/>	<input type="text"/> -None-	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Other Charges :							
<input type="checkbox"/> Platinum Guarantee	<input type="checkbox"/> Convention	<input type="checkbox"/> GBL	<input type="checkbox"/> Hold At Airport for pick-up				
<input checked="" type="checkbox"/> Proof Of Delivery Required	<input type="checkbox"/> Unpack/Debris Removal	<input type="checkbox"/> C.O.D.	<input type="text"/> 0.00				
<input type="radio"/> Declared Value	<input type="radio"/> Insurance Value	Value: \$ <input type="text"/> 900.00					

8. Choose the Tariff Name or Navigator Quote Number (if applicable).

[Click to Hide Services..](#)

Ship Date	06/02/2014	Payment Type:	THIRD PARTY
Ready Time	14:00	Close Time	17:00
Service:	FIRST FLIGHT SERVICE	<input type="checkbox"/> Swap Exchange	

[Special Instructions](#)

[\[Large Text Area\]](#)

I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Yes No

Hazardous Materials	<input type="checkbox"/> Hazardous Materials	24 Hr. Contact Phone#:	[Text Box]
Class:	[Text Box]	UN#:	[Text Box]
<input type="checkbox"/> Hazmat			

[Click to Hide Line Items..](#)

Enter Product #:	[Text Box]	Catalog	X Quantity	[Text Box]	Load Product		
Pieces	[Text Box]	Description	Weight	Weight(kg)	Length		
				Length	Width		
				Width	Height		
					Add		
Pieces	Description	Weight (lbs)	Weight (kg)	Length (in)	Width (in)	Height (in)	#
No data to display							
Total: 0		Total: 0		Total: 0			

[Click to Hide Extended Services..](#)

Tariff Name	-SELECT-		
Navigator Quote Number	[Text Box]		
Extended Services :			
Attempted PU/Del	<input type="checkbox"/> Shipper		<input type="checkbox"/> Consignee
Hotel/Convention	<input type="radio"/> Hotel	<input type="radio"/> Conv	<input checked="" type="radio"/> None
Inside PU/Del	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liftgate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wait Time (Hrs)	[Text Box]		[Text Box]
Two Man PU/Del (Hrs)	[Text Box]		[Text Box]
Special PU/Del	[Text Box]		[Text Box]
Other Charges :			
<input type="checkbox"/> Platinum Guarantee	<input type="checkbox"/> Convention		<input type="checkbox"/> GBL <input type="checkbox"/> Hold At Airport for pick-up
<input checked="" type="checkbox"/> Proof Of Delivery Required	<input type="checkbox"/> Unpack/Debris Removal		<input type="checkbox"/> C.O.D. [Text Box]
	<input type="radio"/> Declared Value	<input type="radio"/> Insurance Value	Value: \$ [Text Box]

[Edit International Information..](#)

9. Enter any Extended Services applicable from the predefined list.

I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Yes No

Hazardous Materials	<input type="checkbox"/> Hazardous Materials	24 Hr. Contact Phone#:	<input type="text"/>
Class:	<input type="text"/>	UN#:	<input type="text"/>
Hazmat			

Click to Hide Line Items..

Enter Product #:	<input type="text"/>	Catalog	X Quantity	<input type="text"/>	Load Product			
Pieces	<input type="text"/>	Description	Weight	Weight(kg)	Length	Width	Height	Add
Pieces	Description	Weight (lbs)	Weight (kg)	Length (in)	Width (in)	Height (in)	#	
No data to display								
Total: 0		Total: 0	Total: 0					

Click to Hide Extended Services..

Tariff Name	<input type="text" value="-SELECT-"/>					
Navigator Quote Number	<input type="text"/>					
Extended Services :						
Attempted PU/Del	<input type="checkbox"/>	Shipper	<input type="checkbox"/>	Consignee	<input type="checkbox"/>	
Hotel/Convention	<input checked="" type="radio"/>	Hotel	<input checked="" type="radio"/>	Conv	<input checked="" type="radio"/>	None
Inside PU/Del	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liftgate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wait Time (Hrs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Two Man PU/Del (Hrs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Special PU/Del	<input type="text" value="-None-"/>	<input type="text" value="-None-"/>	<input type="text" value="-None-"/>	<input type="text" value="-None-"/>	<input type="text" value="-None-"/>	<input type="text" value="-None-"/>
Other Charges :		<input type="checkbox"/> Platinum Guarantee	<input type="checkbox"/> Convention	<input type="checkbox"/> GBL	<input type="checkbox"/> Hold At Airport for pick-up	
<input checked="" type="checkbox"/> Proof Of Delivery Required		<input type="checkbox"/> Unpack/Debris Removal	<input type="checkbox"/> C.O.D. <input type="text" value="0.00"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="radio"/> Declared Value		<input type="checkbox"/> Insurance Value	Value: \$ <input type="text" value="900.00"/>			

Edit International Information..

Validate **Save as Draft** **Submit**

10. Select Edit International Information and enter Service, Customs Value, and Incoterms. All items in **RED are required fields regardless of value. Shipment defaults can be set for these items in the section titled **Settings** then **Shipment Defaults**.**

Other Charges : <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Platinum Guarantee </div> <div style="width: 30%;"> <input checked="" type="checkbox"/> Convention </div> <div style="width: 30%;"> <input type="checkbox"/> GBL </div> <div style="width: 30%;"> <input type="checkbox"/> Hold At Airport for pick-up </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input checked="" type="checkbox"/> Proof Of Delivery Required </div> <div style="width: 30%;"> <input checked="" type="checkbox"/> Unpack/Debris Removal </div> <div style="width: 30%;"> <input type="checkbox"/> C.O.D. <input type="text" value="0.00"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input checked="" type="radio"/> Declared Value </div> <div style="width: 30%;"> <input type="radio"/> Insurance Value </div> <div style="width: 30%;"> Value: \$ <input type="text" value="900.00"/> </div> </div>																										
Click to Hide International Information..																										
Service: <input type="text" value="- SELECT -"/>		Incoterms: <input type="text" value="- Select -"/>																								
International Documentation <p>In order to complete the required international shipment documentation, please fill out the following information completely. You will be required to print and sign all documents that are required for an international shipment. Please give all original documents to the driver that will pick up your shipments.</p>																										
1b) USPPI's EIN (IRS) No. or ID No.: <input type="text"/>																										
1c) Parties to Transaction: <input checked="" type="radio"/> Related <input type="radio"/> Non-related																										
4b) Intermediate Consignee <input type="checkbox"/>																										
9) Method of Transportation: <input type="text" value="- SELECT -"/> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input checked="" type="radio"/> Consolidate <input type="radio"/> Direct </div>																										
Pilot Freight Services is Filing AES <input checked="" type="radio"/> Yes <input type="radio"/> No																										
15) Shipment Reference No.: <input type="text"/> Leave blank if Pilot is filing AES																										
16) Entry Number: <input type="text"/>																										
17) Hazardous Materials: <input checked="" type="radio"/> Yes <input type="radio"/> No																										
18) In Bond Code: <input type="text" value="Foreign Trade Zone withdrawal for"/>																										
19) Routed Export Transaction: <input checked="" type="radio"/> Yes <input type="radio"/> No																										
27) License No. / License Exception Symbol: <input type="text" value="Agreements"/>																										
28) ECCN (When Required): <input type="text"/>																										
<p>Please fill out your Schedule B Description of Commodities. Please note that for any item with a value greater than \$2500.00 you must enter a Schedule B Number for that commodity. Use the Schedule B lookup utility to find your Schedule B Numbers. Click on the row to populate the Schedule B Number.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="7" style="background-color: #f0f0f0; text-align: left;"> Drag a column header here to group by that column </td> </tr> <tr> <td style="background-color: #f08040; color: white; text-align: center;">#</td> <td style="background-color: #f08040; color: white; text-align: center;">Origin</td> <td style="background-color: #f08040; color: white; text-align: center;">Schedule B</td> <td style="background-color: #f08040; color: white; text-align: center;">Quantity</td> <td style="background-color: #f08040; color: white; text-align: center;">Weight (Kg)</td> <td style="background-color: #f08040; color: white; text-align: center;">Value</td> <td style="background-color: #f08040; color: white; text-align: center;">Vin Number</td> </tr> <tr> <td colspan="7" style="text-align: center;">No data to display</td> </tr> </table>						Drag a column header here to group by that column							#	Origin	Schedule B	Quantity	Weight (Kg)	Value	Vin Number	No data to display						
Drag a column header here to group by that column																										
#	Origin	Schedule B	Quantity	Weight (Kg)	Value	Vin Number																				
No data to display																										
<input type="button" value="Edit Schedule B Lines"/>																										
Note: All defaults can be override during entry of a shipment.																										
<input type="button" value="Validate"/> <input type="button" value="Save as Draft"/> <input type="button" value="Submit"/>																										

Note: A detailed explanation of the items in **RED is available in the following section titled **Shipper's Letter of Instruction**. Refer to the items marked with an Asterisk (*) for CoPilot entry requirements.**

11. If an AES (Automated Export System) Entry is required for export then select Edit Schedule B Lines.

Other Charges : <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Platinum Guarantee </div> <div style="width: 30%;"> <input checked="" type="checkbox"/> Convention </div> <div style="width: 30%;"> <input type="checkbox"/> GBL </div> <div style="width: 30%;"> <input type="checkbox"/> Hold At Airport for pick-up </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input checked="" type="checkbox"/> Proof Of Delivery Required </div> <div style="width: 30%;"> <input checked="" type="checkbox"/> Unpack/Debris Removal </div> <div style="width: 30%;"> <input type="checkbox"/> C.O.D. </div> <div style="width: 30%; text-align: center;"> <input type="text" value="0.00"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input checked="" type="radio"/> Declared Value </div> <div style="width: 30%;"> <input type="radio"/> Insurance Value </div> <div style="width: 40%; text-align: center;"> Value: \$ <input type="text" value="900.00"/> </div> </div>																					
Click to Hide International Information..																					
Service: <input type="text" value="- SELECT -"/>		Incoterm: <input type="text" value="- Select -"/>		Customs Value																	
International Documentation																					
<p>In order to complete the required international shipment documentation, please fill out the following information completely. You will be required to print and sign all documents that are required for an international shipment. Please give all original documents to the driver that will pick up your shipments.</p>																					
<p>1b) USPPI's EIN (IRS) No. or ID No.: <input type="text"/></p>																					
<p>1c) Parties to Transaction: <input checked="" type="radio"/> Related <input type="radio"/> Non-related</p>																					
<p>4b) Intermediate Consignee <input type="checkbox"/></p>																					
<p>9) Method of Transportation: <input type="text" value="- SELECT -"/></p>																					
<p>Pilot Freight Services is Filing AES <input checked="" type="radio"/> Yes <input type="radio"/> No</p>																					
<p>15) Shipment Reference No.: <input type="text"/> <small>Leave blank if Pilot is filing AES</small></p>																					
<p>16) Entry Number: <input type="text"/></p>																					
<p>17) Hazardous Materials: <input checked="" type="radio"/> Yes <input type="radio"/> No</p>																					
<p>18) In Bond Code: <input type="text" value="Foreign Trade Zone withdrawal for"/></p>																					
<p>19) Routed Export Transaction: <input checked="" type="radio"/> Yes <input type="radio"/> No</p>																					
<p>27) License No. / License Exception Symbol: <input type="text" value="Agreements"/></p>																					
<p>28) ECCN (When Required): <input type="text"/></p>																					
<p>Please fill out your Schedule B Description of Commodities. Please note that for any item with a value greater than \$2500.00 you must enter a Schedule B Number for that commodity. Use the Schedule B lookup utility to find your Schedule B Numbers. Click on the row to populate the Schedule B Number.</p>																					
<p>Drag a column header here to group by that column</p>																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>#</th> <th>Origin</th> <th>Schedule B</th> <th>Quantity</th> <th>Weight (Kg)</th> <th>Value</th> <th>Vin Number</th> </tr> </thead> <tbody> <tr> <td colspan="7" style="text-align: center; padding: 10px;"> No data to display </td> </tr> </tbody> </table>								#	Origin	Schedule B	Quantity	Weight (Kg)	Value	Vin Number	No data to display						
#	Origin	Schedule B	Quantity	Weight (Kg)	Value	Vin Number															
No data to display																					
<input type="button" value="Edit Schedule B Lines"/>																					
<small>Note: All defaults can be override during entry of a shipment.</small>																					
<input type="button" value="Validate"/> <input type="button" value="Save as Draft"/> <input type="button" value="Submit"/>																					

Note: This section does not need to be completed if an AES entry is not required for export. AES is required for all exports if the commodity code value is \$2,500 or greater or on a U.S. Government issued license (regardless of value).

12. Select Add and enter the Commodity Code, Quantity, Origin, Weight, and Value. Commodity Code (Schedule B) lookup is available by selecting Lookup or by contacting the U.S. Census Bureau for commodity code assistance (800-549-0595 – Option 2 Commodity Code Support).

International Line Items

Please fill out your Schedule B Description of Commodities. Please note that for any item with a value greater than \$2500.00 you must enter a Schedule B Number for that commodity. Use the Schedule B lookup utility to find your Schedule B Numbers. Click on the row to populate the Schedule B Number.

Drag a column header here to group by that column						
ScheduleB Code	ScheduleB Description	Origin	Quantity	Weight (kg)	Value	Vin Number
No data to display						

Add Edit Delete Cancel

Commodity Code	<input type="text"/>	<input type="button" value="Lookup"/>
Commodity Name		
Quantity	<input type="text"/>	Weight
Origin	<input type="button" value="- SELECT -"/>	Vin Number
<input type="button" value="Update"/> <input type="button" value="Back to Shipment"/>		

Note: Select Update and/or Add after each commodity code is entered.

13. When you have completed your airbill, click Validate. Any necessary changes will be listed in a pop-up box.

I consent to screening of any cargo moving air transportation. Failure to provide this consent in the check box indicated will result in your shipment not being provided air transportation.

Yes No

Hazardous Materials	<input type="checkbox"/> Hazardous Materials	24 Hr. Contact Phone#:	<input type="text"/>
Class:	<input type="text"/>	UN#:	<input type="text"/>
Hazmat			

Click to Hide Line Items..

Enter Product #:	<input type="text"/>	<input type="button" value="Catalog"/>	X Quantity	<input type="button" value="Load Product"/>			
Pieces	Description	Weight	Weight(kg)	Length	Width	Height	<input type="button" value="Add"/>
Pieces	Description	Weight (lbs)	Weight (kg)	Length (in)	Width (in)	Height (in)	#

No data to display

Total: 0 Total: 0 Total: 0

Click to Hide Extended Services..

Tariff Name	<input type="button" value="SELECT-"/>
Navigator	WebAirbill
Extended	Service: Estimated Charges: Please fill in the highlighted required fields. Please select "Yes" for screening consent to complete the shipment entry or contact your local Pilot Station. Please select a "Service Level" for this shipment. Please enter a customs value in USD for this shipment. Please enter a valid USPPI EIN Number for 1b. Please select a Method of Transportation for 9. Please enter at least one line item for this shipment.
Attempted	<input type="button" value="Close"/>
Hotel/Con	
Inside PU	
Liftgate	
Private Re	
Wait Time	
Two Man	
Special Per	
Other Charges : <input type="checkbox"/> Platinum Guarantee <input type="checkbox"/> Conventional <input type="checkbox"/> GBL <input type="checkbox"/> Hold At Airport for pick-up <input checked="" type="checkbox"/> Proof Of Delivery Required <input type="checkbox"/> Unpack/Debris Removal <input type="checkbox"/> C.O.D. <input type="text" value="0.00"/> <input type="radio"/> Declared Value <input type="radio"/> Insurance Value Value: \$ <input type="text" value="900.00"/>	
Edit International Information..	
<input type="button" value="Validate"/> <input type="button" value="Save as Draft"/> <input type="button" value="Submit"/>	

Note: If you need to make changes, close the box (incomplete fields will be noted in RED).

14. After all changes/edits are complete, then select the Submit button.

International Documentation

In order to complete the required international shipment documentation, please fill out the following information completely. You will be required to print and sign all documents that are required for an international shipment. Please give all original documents to the driver that will pick up your shipments.

1b) USPPI's EIN (IRS) No. or ID No.:

1c) Parties to Transaction: Related Non-related

4b) Intermediate Consignee

9) Method of Transportation: - SELECT -

Consolidate Direct

Pilot Freight Services is Filing AES Yes No

15) Shipment Reference No.: Leave blank if Pilot is filing AES

16) Entry Number:

17) Hazardous Materials: Yes No

18) In Bond Code: Foreign Trade Zone withdrawal for

19) Routed Export Transaction: Yes No

27) License No. / License Exception Symbol: Agreements

28) ECCN (When Required):

Please fill out your Schedule B Description of Commodities. Please note that for any item with a value greater than \$2500.00 you must enter a Schedule B Number for that commodity. Use the Schedule B lookup utility to find your Schedule B Numbers. Click on the row to populate the Schedule B Number.

Drag a column header here to group by that column						
#	Origin	Schedule B	Quantity	Weight (Kg)	Value	Vin Number
No data to display						

Note: All defaults can be override during entry of a shipment.

Note: No changes can be made online once the airbill has been submitted. Please contact your local Pilot station to make changes.

15. The shipment is now complete and the shipment information will be transmitted to Pilot Freight Services. Please select Print Airway Bill and sign the document prior to the Pilot driver's arrival.

You have successfully submitted shipment# 062097217

Please do not user your browser's back button to edit this shipment. You cannot edit a shipment once it has been submitted. Please click New Shipment to prepare another online shipment.

Thank you for shipping with Pilot Freight Services. Your shipment has been tendered and your shipping documents are ready to be created. Click on the links below to create your shipping documents. Remember that you can reprint any of your recent shipping documents by clicking on "Reprint" from the "SHIP" toolbar.

Print Airway Bill	Print Labels	Create Manifest	Create Return Shipment	Create a New Shipment
Proforma Invoice	Packing Lists	Certificate of Origin		