

International UV Filter Radiometer comparison

Davos, from 19 June to 18 August 2017

In order to avoid problems and unnecessary charges at the customs, we recommend to ship your instrument(s) for the UV Filter Radiometer comparison as follows:

Your local customs Please contact the local customs for correct procedures to avoid paying VAT / tax re-importing your instrument(s) to your country. Export your goods with the following description on your proforma invoice:

"For Calibration"

The instrument will be part of the International UV Filter Radiometer comparison in Davos at the World Radiation Center

NOTE: ****Suspensive procedures**** with permission of the Swiss Custom "Oberzolldirektion"

Authorisation for inward processing Nr. 5814

Shipping documents A sample-proforma- invoice is attached to this document on page 3.

Fill in all data required (instrument type, serial number, cables, laptop etc.) and insert your letterhead if you would like to identify the document with your company.

Attach 3 signed copies of the proforma-invoice to the shipment.

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Very important: Please attach the document from the Swiss Customs ("Oberzolldirektion") to the shipment.

(In case you don't have this document yet, please contact team-office@pmodwrc.ch)

Information to the freightforwarder

NOTE: ****Suspensive procedures**** with permission of the Swiss Custom "Oberzolldirektion"

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Shipping address

World Radiation Center / UV comparison
Dorfstrasse 33
7260 Davos Dorf
SWITZERLAND

Payment

Shipping and handling fees have to be paid by the sender.

- Insurance** PMOD/WRC is not liable for any damage that might occur during the transport. Generally, shipping companies offer extra insurances.
- Shipping companies** We recommend DHL Express, FedEx or UPS. **These couriers have been informed about the import procedure.**
- Return shipment** Return shipment is organized by PMOD to the Senders address unless otherwise agreed.
If available please mention your shipper account number on the proforma invoice for the return shipment.
- Contact** Please do not hesitate to contact World Radiation Center in case of any further questions:
team-office@pmodwrc.ch
- We are happy to support you for the export of your instrument(s).

"SAMPLE – PROFORMA INVOICE"

Your letterhead

SENT BY Company name Your company address ... Name/Department Address City/Postal Code Country Tel./Fax. No. VAT Registration No. 			PROFORMA INVOICE		
SEND TO Company name Physikalisch-Meteorologisches Observatorium Department Calibrations Department Name Irene Keller Address Dorfstrasse 33 City/Postal Code CH-7260 Davos Dorf Country Switzerland Tel./Fax. No. +41 58 467 51 11/71 VAT Registration No. CHE-106.829.948			AWB XXXXXXXXXXXX Incoterm 2010 DAP Number of items X Size L/W/H [cm] XX / XX / XX Total Gross Weight X Total Net Weight [kg] X Movement certificate Proforma Inv. Insurance XX Express No CARRIER DHL Express		
Full description of goods	Customs commodity code	Country of origin	Qty	Unit value and currency	Sub Tot value & currency
Scientific instruments XX	9015.8000	XX	1	XX	XX
Total value and currency					XX

REASON FOR EXPORT

"For Calibration"

The instrument will be part of the International UV Filter Radiometer comparison in Davos at the World Radiation Center

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Place and date insert Place and Date
Signature make 3 copies and sign here
Name Your name

This is a Sample Airway Bill for DHL Express only.
Please fill in the marked fields in order to send your instruments to PMOD/WRC

Track this shipment via the DHL Web Site : <http://www.dhl.com>

Shipment Air Waybill (Non-negotiable) **476 6274 166** ORIGIN **ZGN** DESTINATION CODE

1 Payer account number and insurance details
 Charge to Shipper Receiver 3rd party Cash Cheque Credit Card
 Payer Account No. _____
 Shipment insurance see reverse
 Yes Insured value (in local currency) _____ Not all payment options are available in all countries.

2 From (Shipper)
 Shipper's account number _____ Contact name _____
 Shipper's reference (up to 32 characters but only first 12 will be shown on invoice) _____
 Company name _____
 Address _____
 Postcode/Zip Code (required) _____ Phone, Fax or E-mail (required) _____

3 To (Receiver)
 Company name **PMOD / WRC**
 Delivery address DHL cannot deliver to a PO-Box
**Dorfstrasse 33
7260 Davos Dorf
Switzerland**
 Postcode/Zip Code (required) **7260** Country **Switzerland**
 Contact person **Buhlmann / Thomann** Phone, Fax or E-mail (required) **+41 81 417 51 30 / 40**

4 Shipment details
 Total number of packages _____ Total Weight _____
 Pieces _____ Dimensions in cm: Length _____ Width _____ Height _____
 Full description of contents: **UV-Filter Radiometer**
NOTE: Suspensive procedures authorisation for inward processing. Nr. 5814

5 Non-Document Shipments Only (Customs Requirement)
 Attach the original and four copies of a Proforma or Commercial invoice
 Shipper's VAT/GST number _____ Receiver's VAT/GST or Shipper's EIN/SSN _____
 Declared Value for Customs (as on commercial/proforma invoice) _____ Harmonised Commodity Code if applicable **9015.8000**
 TYPE OF EXPORT Permanent Repair / Return Temporary
 Destination duties/taxes if left blank receiver pays duties/taxes
 Receiver Shipper Other specify approved aircraft number

6 Shipper's agreement (Signature required)
Unless otherwise agreed in writing, we agree that DHL's Terms and Conditions of Carriage are all the terms of the contract between us and DHL, and (1) such Terms and Conditions and, where applicable, the Warsaw Convention limit and exclude DHL's liability for loss, damage or delay and (2) the shipment shall not contain cash or dangerous goods (see reverse).
 Signature _____ Date ____ / ____ / ____

Services
 Domestic Document International Document International Non Document
Not all Services are available to and from all locations
 Express 9 (10.30 to the USA)
 Express 12
 Express / Worldwide
 Express Envelope
 Other _____
 Optional Services (extra charges may apply)
 Saturday Delivery Special Pick-Up
 Delivery Notification
 Other _____
 DHL Global Mail:
 GMB Priority GMB Standard Other _____

CHARGES
 Services _____
 Other _____
 Insurance _____
 VAT _____
 CURRENCY TOTAL _____
 TRANSPORT COLLECT STICKER No. _____
 PAYMENT DETAILS (Cheque, Card No.)
 No. : _____
 Type _____ Expires _____
 Picked up by _____
 Route No. _____
 Time _____ Date _____

For more information see DHL Web Site or call your local DHL office.

ORIGINAL SECTIONS FOR DHL USE ONLY

Origin copy

If you have any questions or concerns, please contact us as soon as possible.

Phone: +41 58 467 51 71 (Irene Keller) or +41 58 467 51 11 (Administration)

Fax: Tel. +41 58 467 51 00

E-mail: team-office@pmodwrc.ch