# CUSTOMS INVOICE

**Invoice #:** _____
**Date:** _____

**CLEARING AGENT / BROKER**

[Company Name]
[Street Address]
[City, State, Zip]
[License Number]

**BILL TO (IMPORTER)**

[Client Name]
[Address]
[VAT/Tax ID]

**SEA FREIGHT SHIPMENT DETAILS**

**Vessel/Voyage:** _____
**Bill of Lading:** _____
**Container No:** _____
**Port of Loading:** _____
**Port of Discharge:** _____
**ETA:** _____

| Description of Charges | Code/HS | Amount |
|---|---|---|
| Customs Import Duty | _____ | 0.00 |
| VAT / Sales Tax | _____ | 0.00 |

| Description of Charges | Code/HS | Amount |
|---|---|---|
| Port Handling Charges | - | 0.00 |
| Customs Clearance Agency Fee | - | 0.00 |
| Documentation & Filing Fee | - | 0.00 |
| Storage / Demurrage (if applicable) | - | 0.00 |

Subtotal: 0.00
Service Tax: 0.00
TOTAL DUE: USD 0.00

**Payment Terms:** Payable upon receipt. Please include Invoice Number as reference.

**Bank Details:** [Bank Name] | **Swift/BIC:** [Code] | **Account:** [Number]