PAGE 1 OF:



ACE EMANIFEST FAX FORM

TRIP INFO	DRIMATION]
CARRIER NAME			ACE COVERSHEET FAX #/ EMAIL BACK (for barcoded ACE coversheet)				
				·			
SCAC CODE	TOID AULIS ADED		DODE OF ADDIVA		FCTINANTED	TIME OF A DI	DIV / A I
SCAC CODE	TRIP NUMBER		PORT OF ARRIVAL ESTIMATED TIME OF ARI			KIVAL	
					DATE:		
TRUCK UNIT # TRUCK PLATE			PLATE STATE/PROVINCE TIME:				
					I IIVIE:		
TRAILER UNIT #		TRAILER PLATE	PLATE STATE/PRO	OVINCE	SEAL (if applic	. (if applicable)	
	1 2	1 2	1	2			
DRIVER NAME			DRIVER CELL PHONE #				
TEAM DRIVER NAME (if applicable)			PASSENGER NAME (if applicable)				
SHIPMENT INFORMATION							
SCAC CODE	SCAC CODE SHIPMENT CONTROL NUMBER		SHIPMENT TYPE				
			[] PAPS	[] EMPTY	[] IN-B	OND	
			[] SECTION 321	[] IIT	[] O TH	IER	
SHIPPER			CONSIGNEE (if crossing empty, use this box to provide a U.S. destination)				
NAME:			NAME:				
ADDRESS:			ADDRESS:				
CITY, PROV:			CITY, STATE:				
POSTAL CODE:			ZIP CODE:				
DESCRIPTION OF GOODS			QUANTITY	WEIGHT		UN CODE (if	hazmat)
				S	☐ LBS		
			□ PK	GS	□ KGS		

** ATTENTION – PLEASE FOLLOW INSTRUCTIONS CAREFULLY **

SEC 321 VALUE (in USD)

Without all of the necessary fields filled in, we CANNOT process your ACE eManifest.

- Please print legibly. Trucks can be delayed and penalties assessed by CBP. A barcoded coversheet can be requested via fax from BorderConnect. Call 1-800-596-5176 to request a coversheet.
- BorderConnect does not fax to brokers. Be sure to fax paperwork to customs broker as soon as possible to avoid delays.
- If you are unsure if BorderConnect has received your fax, please call to confirm at 1-800-596-5176.

BorderConnect

SEC 321 COUNTRY OF ORIGIN

Phone: 1-800-596-5176 | alternate: 1-519-967-9072

Fax: 1-866-964-1717 | alternate: 1-866-415-0747

Email: fax@borderconnect.com