**VT Chemistry Stockroom Outgoing Shipping Request Form**

* Sender/PI is responsible for supplying ISR for dry ice, if required.

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| Date you would like to ship package:  *Note: International shipments can take up to 1 week to coordinate for hazardous material. Domestic shipments require at least 2 hour notice.* |
| **Shipping From (Shipper)** |
| Name of Sender: |
| Department: **Chemistry** Room # and Bldg.: **171 Davidson Hall** |
| Street Address: **1040 Drillfield Drive** City: **Blacksburg** Zip Code: **24061** |
| Phone Number:  E-mail: |
| Responsible Person: Responsible Person Phone: |
| **Shipping To (Consignee)** |
| Name:  Phone #: |
| Institution/Business Name: |
| Address: |
| City:  State:  Zip Code: |
| Country: |
| Fund number (charge to code) : **Content: Documents**  **Research Sample**  **Lab Chemicals** **Equipment**  **Other** |
| Will your shipment contain **dry ice**?  Yes  No If yes, approximately how much (kg)? |
| What **type** of material are you shipping?  Solid  Liquid  Both |
| Please describe the material to be shipped.  What is the primary packaging,?  What is the volume of material in each primary?  What is the quantity of primary containers?  All liquid primary receptacles **must** be individually secured with secondary containers. |
| Are you shipping potentially **hazardous materials**?  Yes  No |
| Will this shipment contain **chemicals,** e.g. formalin or ethanol?  Yes  No |
| If yes, list all chemicals and quantities here. Use the full chemical name, including percentage |
| Domestic Shipping Mode: Check the selected mode  Overnight2-Day3-DayGround  1-Day Freight2-Day Freight3-Day Freight  Shipping company: Circle FedEx, UPS, DHL, or Freight  If Freight, specify Freight company:  If nothing selected Fedex will be used |
| International shipment mode: Check the desired mode  FedEx Priority FedEx Economy  UPS Worldwide Express  UPS Worldwide Expedited |
| General information: complete all of the following fields  No. Of Packages: \_\_\_\_ Total Weight: \_\_\_\_\_\_\_ Insurance, if needed: $\_\_\_\_\_\_\_\_  Return Material Authorization No. (RMA), if needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Additional comments (if you want tracking sent to sender or consignee please specify): |