

1301-808 Nelson Street
Vancouver, BC V6Z 2H2
CANADA
E-mail: info@crossconnectcl.com



CROSSCONNECT
CUSTOMS & EVENT LOGISTICS



The International Conference on Biofabrication

Biofabrication 2023

Saskatoon, Canada • Sept. 17 - 20



SHIPPING & CUSTOMS CLEARANCE SERVICES

INTRODUCTION

Dear Exhibitor,

Cross Connect Customs & Event Logistics has been appointed the **OFFICIAL TRANSPORT CARRIER & CUSTOMS BROKER** for **BIOFABRICATION 2023** taking place at the **Saskatoon Inn & Conference Centre**. We would like to ensure that your materials arrive “on time” in the most cost-efficient manner. We suggest that you read these instructions in conjunction with the on-line exhibitor’s manual provided by the Show Organizer.

Our helpful instructions will assist you in preparing for the correct, and timely, dispatch of your exhibits to and from the event. The conference organizers highly recommends that you use the services of Cross Connect for a complete logistics package. Our complete package will move your exhibit(s) from your door to the conference venue and back.

PLEASE NOTE: Failure to comply with the deadlines, consignee, and document instructions, will cause unnecessary delays in customs clearance and may lead to additional charges. For this reason, if you will be using a freight forwarder or carrier other than Cross Connect, please be sure to pass these instructions on to them and direct their pre-alerts to us.

The conference organizer and Cross Connect Customs & Event Logistics will not accept responsibility for late arrivals, or non-deliveries, to the venue if these guidelines and/or recommendations are not followed.

Sincerely,

Cross Connect Team

E-mail: info@crossconnectcl.com

Website: www.crossconnectcl.com



SHIPPING INSTRUCTIONS / ARRIVAL DATES

IMPORTANT: All paperwork and freight must be clearly labeled/marked with the following:

BIOFABRICATION 2023
(Your Exhibitor Name & Booth #)

SHIP TO ADDRESS / PRE-ALERT / CUSTOMS DOCUMENTATION REQUIREMENTS

Please complete the Cross Connect Order Form and Commercial Invoice Packing List (CIPL) in this manual.

The CIPL should contain full detailed description of the contents, serial no.'s, customs HS/tariff codes, and quantity/weight/value of each item listed. Invoices should be in the currency of country shipped from clearly showing which items are for temporary import and which are for permanent import. Examples of both forms are provided for assistance.

SHIP TO ADDRESS:

BIOFABRICATION 2023
Exhibiting Company Name, Booth # _____
c/o Hub City Display
1740 Ontario Avenue
Saskatoon, SK S7K 1T1
CANADA

ALL EXHIBIT MATERIALS MUST BE SHIPPED TO HUB CITY DISPLAY AT THE ABOVE ADDRESS. DIRECT TO SHOW SHIPMENTS ARE NOT PERMITTED AND WILL BE REFUSED BY THE SASKATOON INN & CONFERENCE CENTRE. PLEASE CONTACT HUB CITY FOR INFORMATION, RATES, AND THEIR ORDER FORM. HUB CITY CONTACT IS CAROL BAKER TELEPHONE: 306-653-4409 AND E-MAIL: CAROLB@HUBCITYDISPLAY.COM

*****Please send Cross Connect draft copies of your CIPL prior to shipping so it may be reviewed and pre-approved*****

All document checks and pre-alerts should be emailed to info@crossconnectcl.com

IMPORTANT: Certain commodities such as foodstuffs, beverages, pharmaceutical products, cosmetics, certain electronic and telecommunication and military items, animal & plant products (CITES) will be subject to import licence or other certification requirements. Kindly contact Cross Connect at least 2 months prior to the show if sending any of the above items.

Failure to pre-alert us of your shipment means we are unaware it exists and cannot be held responsible for your materials arriving to the show late, or not at all.



INSURANCE

We are not responsible for any loss, pilferage or damage while goods are left unattended at your booth. The handling of goods is carried out at the exhibitor/contractor's risk. We, therefore, strongly recommend that all exhibitors arrange insurance coverage to include transit to and from the exhibition, while also on display during the Exhibition.

PAYMENT

Unless agreed in advance payment for all services must be made prior to, or during the show. We accept the following three methods of payment:

1. Bank Wire – Bank details can be sent upon request.
2. Credit Card – We can accept payment by credit card. Please inform us of the card details in advanced on our Customs & Transportation Order Form. Credit Card transactions are subject to a 5% service fee.
3. Company Checks

PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS !

Customs & Transportation Services Order Form



Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
2. The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

Continuous Authority granted

CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Services Required (please check all that apply):

Transportation Customs Clearance Advance Warehouse

Event & Exhibitor

Shipment Delivering to (please check one): Direct to Event/Show Site Advance Warehouse

Exhibitor Name: Booth #:

Event Name: Event Dates: to

Facility/Venue Name:

Facility/Venue Address:

City: State/Province: Zip/Postal Code:

On-site Contact: Cell #:

E-mail: Importer # (if applicable):

Shipper

Company Name: IRS #:

Address: State/Province: Zip/Postal Code:

City: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

Return Freight

Same as Shipper No Return Shipment

Company Name: IRS / Importer #:

Address: State/Province: Zip/Postal Code:

City: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

Billing

Same as Shipper

Company Name (Legal): GST/HST# (if applicable):

Address: State/Province: Zip/Postal Code:

City: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

MUST BE COMPLETED

Payment

Charge to: Visa MasterCard American Express

Cardholder Name: CVV Number:

Credit Card Number: Expiry Date:

I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).

Cardholder Signature: Date:

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)	Length	Width	Height	Per Piece	Total
		@ Dimensions (Inches) Each			@ Weight (lbs) Each	
		@ Dimensions (Inches) Each			@ Weight (lbs) Each	
		@ Dimensions (Inches) Each			@ Weight (lbs) Each	
		@ Dimensions (Inches) Each			@ Weight (lbs) Each	
		@ Dimensions (Inches) Each			@ Weight (lbs) Each	

Shipment / Freight

Requested Service Level: Air 2nd Day Truck Other: _____

Additional Services Required: Lift Gate Inside Pick-up Inside Delivery Weekend Pick-up Weekend Delivery

Total Shipment Value: Carrier Name & Contact Info:

Available for Pick-up Date: Shipper Hours of Operation: to Must Deliver By:

Cargo Insurance / Declared Value

This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.

Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf. Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

Client Signature (wet ink signature required - digital signature NOT allowed)

I have read and agree to the terms of this contract.

Signature: Date:

Printed Name: Title:

Cross Connect Internal Use Only

Accepted by:

Date:

Signature:

Customs & Transportation Services Order Form



Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

- The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
- The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

Continuous Authority granted

CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Services Required (please check all that apply):

Transportation Customs Clearance Advance Warehouse

Event & Exhibitor	Shipment Delivering to (please check one):	<input type="checkbox"/> Direct to Event/Show Site	<input checked="" type="checkbox"/> Advance Warehouse
	Exhibitor Name: ABC COMPANY	Booth #: 1001	
	Event Name: NAME OF THE SHOW / EVENT YOU ARE ATTENDING	Event Dates: 05-Jul-21 to 07-Jul-21	
	Facility/Venue Name: NAME OF CONVENTION CENTRE / HOTEL / VENUE WHERE THE EVENT IS BEING HELD		
	Facility/Venue Address: ADDRESS OF THE CONVENTION CENTRE / HOTEL / VENUE WHERE THE EVENT IS BEING HELD		
	City: TORONTO	State/Province: ON	Zip/Postal Code: M0X X0X
	On-site Contact: JOHN SMITH	Cell #: 555-555-0000	
	E-mail: JSMITH@DOMAIN.COM	Importer # (if applicable): 123456789RM0001	

Shipper	Company Name: ABC COMPANY	IRS #: 12-3456789	
	Address: 123 SOMEPLACE AVENUE, SUITE 3		
	City: NEW YORK	State/Province: NY	Zip/Postal Code: 10093
	Contact Name: JOHN SMITH	Tel: 555-555-0000	
	E-mail: JSMITH@DOMAIN.COM		

Return Freight	<input checked="" type="checkbox"/> Same as Shipper <input type="checkbox"/> No Return Shipment		
	Company Name: ABC COMPANY	IRS / Importer #: 12-3456789	
	Address: 123 SOMEPLACE AVENUE, SUITE 3		
	City: NEW YORK	State/Province: NY	Zip/Postal Code: 10093
	Contact Name: JOHN SMITH	Tel: 555-555-0000	

Billing	<input checked="" type="checkbox"/> Same as Shipper		
	Company Name: ABC COMPANY	GST/HST# (if applicable): 123456789RM0001	
	Address: 123 SOMEPLACE AVENUE, SUITE 3		
	City: NEW YORK	State/Province: NY	Zip/Postal Code: 10093
	Contact Name: JANE DOE, ACCOUNTS PAYABLE	Tel: 555-555-0001	

MUST BE COMPLETED

Payment	Charge to:	<input checked="" type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
	Cardholder Name: JOHN SMITH	CVV Number: 123		
	Credit Card Number: 1234 5678 9123 4567	Expiry Date: 11/24		
	I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).			
	Cardholder Signature: <i>John Smith</i>	Date: 10-Jun-21		

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)	Length	Width	Height	Per Piece	Total		
							2	SKIDS
1	CRATE	@ Dimensions (Inches) Each	41	52	50	@ Weight (lbs) Each	1,000	1,000
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
3		@ Dimensions (Inches) Each				@ Weight (lbs) Each		1,800

Shipment / Freight	Requested Service Level:	<input type="checkbox"/> Air	<input type="checkbox"/> 2 nd Day	<input checked="" type="checkbox"/> Truck	<input type="checkbox"/> Other: _____
	Additional Services Required:	<input checked="" type="checkbox"/> Lift Gate	<input type="checkbox"/> Inside Pick-up	<input type="checkbox"/> Inside Delivery	<input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> Weekend Delivery
	Total Shipment Value: \$ 10,000.00	Carrier Name & Contact Info: IF USING CARRIER OTHER THAN CROSS CONNECT, PROVIDE INFO.			

Available for Pick-up Date: 15-Jun-21	Shipper Hours of Operation: 8:00 am to 4:00 pm	Must Deliver By: 30-Jun-21 @ 4:00 pm
Cargo Insurance / Declared Value		
This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.		

Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf. Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

Client Signature

I have read and agree to the terms of this contract.

Signature: *John Smith*

Date: 10-Jun-21

Printed Name: JOHN SMITH

Title: CEO

Cross Connect Internal Use Only

Accepted by:

Date:

Signature:



NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.
 HOURS: Mon-Fri 9 am - 5 pm *E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

Shipper:	Consignee (Ship To):	Importer/Owner of Goods: <input type="checkbox"/> Same as Shipper	Shipped Via:	*REMARKS ("X" each item) *A – TEMPORARY IMPORT *B – PERMANENT IMPORT *C – GIVEN AWAY / SOLD
			Shipped To: <input type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site	
			IRS #:	
			Pieces:	
			Weight: <input type="checkbox"/> kg <input type="checkbox"/> lbs	
			Currency:	
			Ship Date:	
Does this company have a Canadian Office?				

# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name & Model # for all electronic equipment.</small>	Origin	Weight in _____ (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value

**FOB (Free On Board) VALUE: indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

**FOB VALUE:	
INSURANCE:	
FREIGHT CHARGE:	
**TOTAL CIF VALUE:	

**CIF (Cost, Insurance, and Freight) VALUE: indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions" , as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf . The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE:
 PERMANENT IMPORT VALUE:

Signature: _____

Date: _____



NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.
 HOURS: Mon-Fri 9 am - 5 pm *E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

***IMPORTANT:**
MUST be completed in full.

Shipper: ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000	Consignee (Ship To): ABC COMPANY, BOOTH # 1001 C/O NAME OF SHOW/EVENT VENUE NAME VENUE ADDRESS ONSITE CONTACT NAME & CELL PHONE #	Importer/Owner of Goods: <input checked="" type="checkbox"/> Same as Shipper ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000 Does this company have a Canadian Office? No	Shipped Via: TRANSPORTATION COMPANY NAME Shipped To: <input checked="" type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site IRS #: 12-3456789 Pieces: 3 Weight: 1,800 <input type="checkbox"/> kg <input checked="" type="checkbox"/> lbs Currency: USD Ship Date: 06/15/2021 (mm/dd/yyyy)	*REMARKS ("X" each item) *A - TEMPORARY IMPORT *B - PERMANENT IMPORT *C - GIVEN AWAY / SOLD
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# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name & Model # for all electronic equipment.</small>	Origin	Weight in lbs (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value
1	SKID	1	DISPLAY BOOTH	USA	400	48	48	48	1.81	9403.20	X			5,250.00	5,250.00
1	CRATE	2	50" LED TV'S - LG MODEL# 55EG9100	CHINA	50	41	52	50	1.75	8528.72	X			700.00	1,400.00
		2	WEIGHTED METAL TV STANDS	JAPAN	950					9403.20	X			500.00	1,000.00
1	SKID	5000	ADVERTISING LITERATURE	USA	200	48	48	48	1.81	4911.10			X	0.15	750.00
		1000	BALL POINT PENS	CHINA	48					9608.10			X	0.35	350.00
		400	CATALOGS	USA	150					4911.10			X	3.00	1,200.00
		2	POSTERS	USA	2					4911.91		X		25.00	50.00

***Electronic equipment MUST include Brand Name & Model #.**

***Each commodity MUST be listed on its own line; DO NOT group items.**

***Specific descriptions required; Vague descriptions such as "Give Aways", "Display Materials", or "Trade Show Samples" will NOT be accepted.**

***Values need to reflect the cost of goods (price paid), or the selling price of the goods (price payable); whichever is greater.**

***\$0 values will NOT be accepted.**

***Indicate the Country of Manufacture (where the goods are made); NOT the country of purchase.**

**FOB (Free On Board) VALUE: indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

**FOB VALUE:	10,000.00
INSURANCE:	
FREIGHT CHARGE:	
**TOTAL CIF VALUE:	10,000.00

**CIF (Cost, Insurance, and Freight) VALUE: indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE: 7,650.00
 PERMANENT IMPORT VALUE: 2,350.00

Signature: John Smith Date: 06/10/2021