

**Burlington Coat Factory  
POE Container Worksheet (One [1] Container per Sheet)**

**BCFW MUST BE NOTIFIED OF ANY CONTAINERS WHEN VENDOR IS RESPONSIBLE FOR THE OCEAN FREIGHT.**  
IT IS THE VENDOR'S RESPONSIBILITY TO INFORM BCFW'S TRANSPORTATION DEPARTMENT OF ANY CHANGES BY FAXING A COPY OF THIS FORM WITH ADDITIONAL INFORMATION.

**Section I. (Complete upon sailing and fax to the BCFW Transportation Department at 609-387-2343.)**

Vendor Name (USA): \_\_\_\_\_

	1 <sup>st</sup> CONTACT		2 <sup>nd</sup> CONTACT
<b>Contact</b>		<b>Contact</b>	
<b>Phone</b>		<b>Phone</b>	
<b>Fax</b>		<b>Fax</b>	
<b>E-mail</b>		<b>E-mail</b>	

Ocean Carrier \_\_\_\_\_ Vessel Name (Mother Vessel)/Voyage # \_\_\_\_\_

Port of Entry \_\_\_\_\_ ETD \_\_\_\_\_ ETA \_\_\_\_\_ FOB \_\_\_\_\_

Container # \_\_\_\_\_ HBL # \_\_\_\_\_ Container size \_\_\_ 20' \_\_\_ 40' \_\_\_ 40'HC \_\_\_ 45' (please check one)

Is the container being railed to another port? YES \_\_\_ NO \_\_\_

If yes, which port? \_\_\_\_\_

Expected Arrival Date \_\_\_\_\_

PO #	# Ctns.

PO #	# Ctns.

PO #	# Ctns.

Total Cartons \_\_\_\_\_

Total CBM's \_\_\_\_\_

Total Weight (KG) \_\_\_\_\_

**EACH PURCHASE ORDER MUST BE LOADED COMPLETELY BEFORE LOADING THE NEXT PURCHASE ORDER.**  
IF THE PO'S ARE MIXED WITHIN THE CONTAINER, YOU MAY BE SUBJECT TO A CHARGEBACK OF UP TO \$500.00 PLUS DRIVER DETENTION TIME AND \$25.00 PER MAN HOUR UNLOADING TIME.

Is the container on a chassis? YES \_\_\_ NO \_\_\_

**Section II. (Complete upon clearance and fax to BCFW's Transportation Department at 609-387-2343.)**

Actual Arrival Date \_\_\_\_\_ Date of U.S. Customs Clearance \_\_\_\_\_ Last Free Day \_\_\_\_\_

Date CF3461 Faxed to BCFW \_\_\_\_\_ Clearance Pick Up # (Rail Only) \_\_\_\_\_

Customs Broker Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name \_\_\_\_\_

**If Burlington Coat Factory Warehouse is responsible for picking up container from the port, BCFW requires a minimum of 15 days free of charges after the pick up from the port. BCFW will pay \$25.00 per day after day 15. Any balance will be the responsibility of the vendor.**

Acknowledged by \_\_\_\_\_ Signed by \_\_\_\_\_ Date \_\_\_\_\_  
(Vendor Name)

**DELIVERY WILL BE SCHEDULED FOR THE 1<sup>ST</sup> AVAILABLE APPOINTMENT AFTER RECEIPT FO FULLY COMPLETED FORM AND A COPY OF CUSTOMS CLEARANCE CF3461.**