

ACE EMANIFEST FORM

TRIP INFORMATION				PAC	GE 1 OF:		
CARRIER NAME			ACE COVERSHEET FAX #/EMAIL BACK (for barcoded ACE coversheet)				
TRIP NUMBER			PORT OF ARRIVAL ESTIMATED TIME OF ARRIVAL				
				DAT	DATE:		
					TIM		
TRUCK UNIT #	JCK UNIT # TRUCK PLATE		PLATE STATE/		CARGO EXEMPTIONS		
					□ EMPTY □ IIT		
TRAILER UNIT #	TRAILER PLATE		PLATE STATE/	NCE SEAL	SEAL (if applicable)		
1 2	1 2		1	2			
RIVER NAME DRIVER O		ELL PHONE #	DRIVER EMA	R EMAIL			
TEAM DRIVER NAME (if applicable)			PASSENGER NAME (if applicable)				
SHIPMENT INFORMATION	ON						
SHIPMENT CONTROL NUMBER			SHIPMENT TYPE				
			□ PAPS □ IN-BOND				
			☐ SECTION 321 ☐ OTHER				
SHIPPER			CONSIGNEE				
NAME:			NAME:				
ADDRESS:			ADDRESS:				
CITY, STATE/PROV:			CITY, STATE/PROV:				
ZIP/POSTAL:			ZIP/POSTAL:				
DESCRIPTION OF GOODS			QUANTITY		WEIGHT (gros		UN CODE (if hazmat)
				PCS PKGS		LBS KGS	

** ATTENTION - PLEASE FOLLOW INSTRUCTIONS CAREFULLY **

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 or email, please call to confirm at 1-800-596-5176.



Phone: 1-800-596-5176 | **alternate:** 1-519-967-9072 Fax: 1-866-964-1717 | alternate: 1-866-415-0747

Email: fax@borderconnect.com