



SHIPPING INSTRUCTIONS (SEALIFT 2024)

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| STEP 1 | Shipping details | | See Appendix - Step 1 | | | | | | |
|--|-----------------------|---|-----------------------|--|--|--|--|--|--|
| Your billing address is the same as the shipping address: Yes | | | | | | | | | |
| Shipment: | | | | | | | | | |
| Name: Address: | | | | | | | | | |
| City: | | | | | | | | | |
| Province: | Postal Code: | | | | | | | | |
| Phone (North) | Cellular: | | • | | | | | | |
| Phone(South): | | | • | | | | | | |
| Fax: | E-mail: | | | | | | | | |
| Emergency contact: | | | | | | | | | |
| Name: | | | | | | | | | |
| Phone: | E-mail: | _ | | | | | | | |
| • | | | • | | | | | | |
| STEP 2 | Shipping Date | | See Appendix - Step 2 | | | | | | |
| When would you like | e to ship your cargo? | | | | | | | | |
| | | | | | | | | | |
| STEP 3 | Products | | See Appendix - Step 3 | | | | | | |
| Purchasing Products | | _ | | | | | | | |
| | | _ | | | | | | | |
| Product Description (General Merchandise, Food, Vehicle, Hazardous Material, etc.) | | | | | | | | | |
| | | | | | | | | | |
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| STEP | 4 | Additional information | | See Appendix - Step 4 | | | | |
|---|----------------|------------------------------|-------------------|-----------------------|--|--|--|--|
| Delivery to site | (Nunavik only) | Yes | No | | | | | |
| Maritime cargo insurance | | Yes | No | | | | | |
| If yes, | Value before | e taxes: \$ | | | | | | |
| Mixing of Purchase | Orders | Yes | No | | | | | |
| Container (20 feet) | | | | | | | | |
| Other individuals in | n your cargo? | Yes | No | | | | | |
| Return Shipment: | | | | | | | | |
| Are you planning a | return? | Yes | No | | | | | |
| STEP | 5 | Sealift Deposit (Marshalling | only) | See Appendix - Step 5 | | | | |
| Credit card Please fill out the form located on page 6 or click on the following link: Authorization Form Additional notes | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Signature | | | Date (mm/dd/yyyy) | | | | | |

APPENDIX

STEP 1 - SHIPPING DETAILS

Shipment: Please provide your delivery address.

Emergency contact: Please provide a contact person to reach in case of emergency.

STEP 2 - SHIPPING DATE

1st Sailing:

Communities: Akulivik, Arviat, Aupaluk, Baker Lake, Chesterfield Inlet, Coral Harbour (NU), Igaluit, Inukjuak,

Ivujivik, Kangiqsualujjuaq, Kangiqsujuaq, Kangirsuk, Kimmirut, Kinngait (Cape Dorset), Kuujjuaq (Nunavik), Kuujjuaraapik, Pangnirtung, Puvirnituq, Quaqtaq, Rankin Inlet, Salluit,

Sanikiluaq, Tasiujaq et Umiujaq, Whale Cove (Nunavut).

Deadline: The deadline for bringing your products is **May 15, 2024.**

2nd Sailing:

Communities: Arctic Bay, Baker Lake, Cambridge Bay, Clyde River, Coral Harbour (NU), Gjoa Haven, Grise Fiord,

Igloolik, Iqaluit, Kugaaruk, Kugluktuk, Kuujjuaq (Nunavik), Naujaat (Repulse Bay), Pond Inlet,

Qikiqtarjuaq, Rankin Inlet, Resolute Bay, Sanirajak, Sanikiluaq, Taloyoak (Nunavut).

Deadline: The deadline for bringing your products is **June 15, 2024.**

3rd Sailing:

Communities: Akulivik, Arviat, Aupaluk, Baker Lake, Chesterfield Inlet, Coral Harbour (NU), Igaluit, Inukjuak,

Ivujivik, Kangiqsualujjuaq, Kangiqsujuaq, Kangirsuk, Kimmirut, Kinngait (Cape Dorset), Kuujjuaq (Nunavik), Kuujjuaraapik, Pangnirtung, Puvirnituq, Quaqtaq, Rankin Inlet, Salluit,

Sanikiluaq, Tasiujaq et Umiujaq, Whale Cove (Nunavut).

<u>Deadline:</u> The deadline for bringing your products is **August 15, 2024.**

Note for clients with marshalling only:

We kindly ask you to facilitate our operations by having your entire cargo delivered and consolidated with your complete address and contact information within 72 hours (3 days) prior to marshalling.

<u>Marshalling</u> means that you are not purchasing your products from us but utilizing our services to package and transport your goods by boat.

STEP 3 - PRODUCTS

Purchase of Please indicate whether you are purchasing the products or if this is being done by

Products: Arctic Consultants.

Description: Please briefly describe the products you wish to send to the North.

If you have a list of products or photos, please send them to us with this form.

You can also consult our online product catalog.

STEP 4 - ADDITIONAL INFORMATION

Delivery to Site:

Delivery to site in Nunavik only.

If you have checked "**yes**" in step 3, it means that your cargo will be delivered directly to the shipping address you provide in step 1. If your address is a postal address, delivery is not possible.

possible.

<u>Calculation:</u> Fees are calculated per metric ton of cargo.

Maritime cargo insurance:

The value to be insured corresponds to the value of goods and services before taxes.

Rates:

General merchandise \$0.72 per \$100 (Minimum \$50) Vehicle \$1.35 per \$100 (Minimum \$50)

Mixing of Purchase Orders:

Please check "yes" if we can mix products from multiple orders or different suppliers in the same shipment. Please check "no" if you prefer each of your orders to be shipped separately, in different shipments.

Container (20 feet)

<u>Purchase:</u> You want to buy a container with Arctic Consultants.

Yours: You already own a container and want to use it for transporting your cargo.

<u>Rental:</u> You want to rent a container with Arctic Consultants.

Surcharge applicable if the container does not return on the same vessel.

If the container is not returned on the first vessel of 2025, you will be charged at market price.

None: You want to use a wooden crate.

Autres personnes dans votre cargaison:

Will there be one or more other person(s) transporting goods in your cargo?

Return Shipment:

Are you planning to return goods to the South for 2024? If you checked "yes," we will contact you for more details.

STEP 5 - SEALIFT DEPOSIT (MARSHALLING ONLY)

A non-refundable deposit of \$500 is required to reserve your space on the boat. In case of non-payment, the reservation will not be made.

Electronic Funds Transfer (EFT):

Please send the deposit to the following address: $\underline{mnormandin@arcticconsultants.ca}$

If a question-answer is required:

Question: Arctic Consultants

Answer: Your client number. (Example: A1234)

Credit Card:

Please fill out the form located on page 6 or click on the following link: <u>Authorization Form</u> An electronic receipt will be sent to you after the payment is made.





Credit Card Authorization Form

Please fill out all fields. You can cancel this authorization at any time by contacting us.

This authorization will remain in effect until canceled. The information will be processed by Square, Inc. and may be stored in the United States and other countries.

| Credit card infromation | | | | | | | |
|---|--------------|-------------------------|---------------|------------|----|--|--|
| Card Type: | ☐ MasterCard | □ VISA | ☐ Discover | □AMEX | | | |
| | □Other | | | | | | |
| Cardholder's name (as it appears on the card): | | | | | | | |
| Card number :_ | | | | | | | |
| Expiration date (mm/yy): | | | CVV: | | | | |
| Cardholder's postal code (from the credit card billing address): | | | | | | | |
| | | | | | | | |
| I, | . 1 12 14 | , authorize | Arctic Consul | tants Inc. | to | | |
| I,, authorize Arctic Consultants Inc to debit my above-mentioned credit card for the agreed-upon purchases. | | | | | | | |
| I consent to having my information recorded for future transactions. | | | | | | | |
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| | | | | | | | |
| Customer's Sig | gnature | $\overline{\mathbb{D}}$ | ate | | | | |