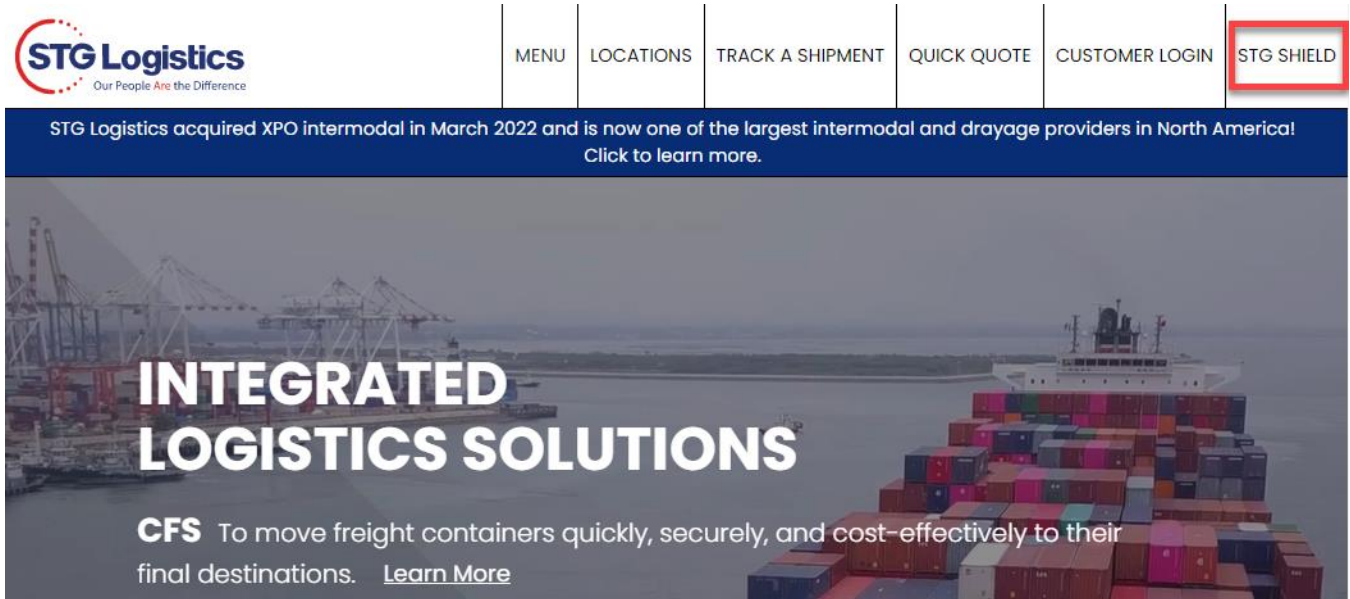


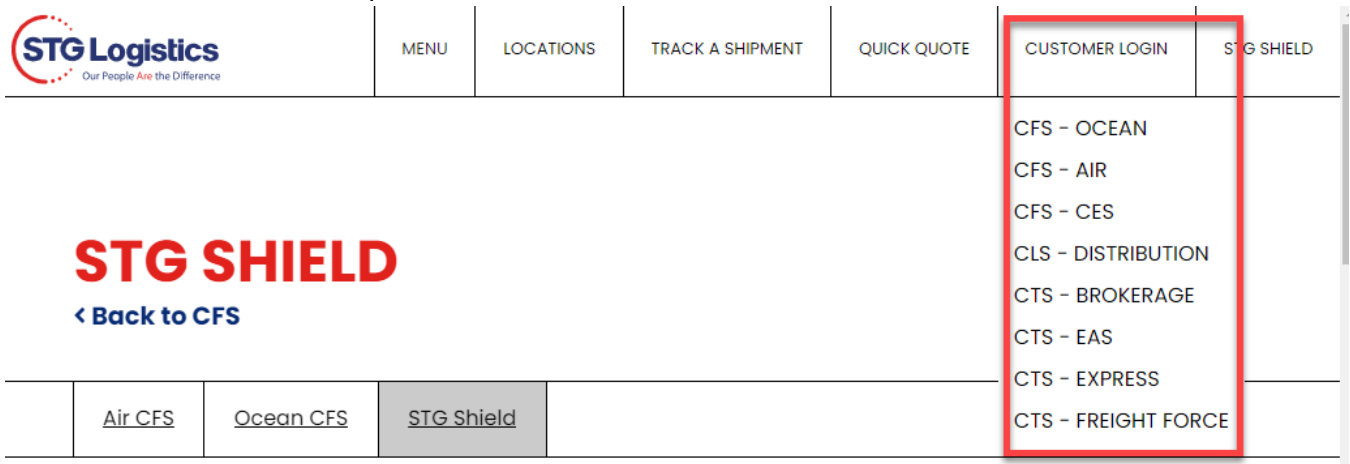
## STG Shield

STG Shield is a first-party policy protecting your goods for up to their stated value in the event of physical loss or damage in transit.

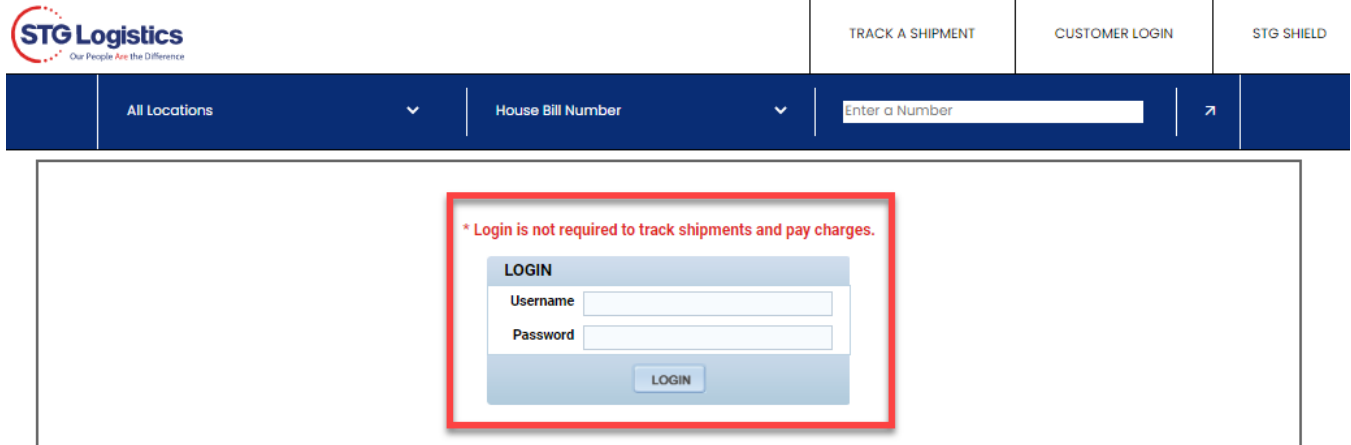
Click on link to open STG website, <https://www.stgusa.com/> and click STG SHIELD button.



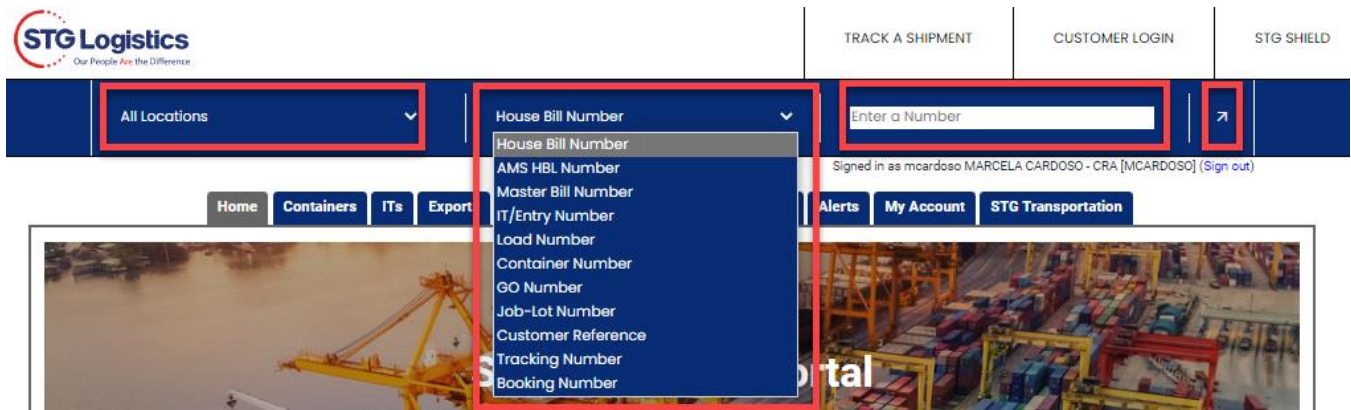
To log in directly to STG SHIELD click on link <https://www.stgusa.com/stg-shield> and select Ocean CFS from CUSTOMER LOGIN drop down menu.



Login with your Username and Password, click LOGIN button.



- Filling in Search desired location or leave 'All Locations'.
- Select House Bill Number or any of the drop down listed.
- Add related number
- Click Go



Click on the AMS HBL Number to view container information.

Warehouse Collect [View Notes](#) [View Outturn Report](#) [Create Alert](#) [Attachments](#)

AMS HBL Number	HBL Number	Pcs	Pkg	Lbs	Cbm	Description	ITD	HL	Hold	Mks Hld	Hazmat	Ship Date	STG Delivery
<a href="#">ECUWHOU2212375</a>	TAOHOU01367	18	PKG	14771	6	GEARBOX	HOU					20-JAN-2023	
<a href="#">ECUWHOU2212373</a>	TAOHOU01368	18	PKG	14771	6	GEARBOX	HOU					20-JAN-2023	
<a href="#">ECUWTAOMKC00343</a>	TAOMKC00343	2	PKG	5732	28.64	CNC MACHIN	KAS					25-JAN-2023	
<a href="#">OGLSCOD22120419</a>	TAOMSP00365	290	CTN	1404	8.81	FISHING RO	MIN					20-JAN-2023	
<a href="#">ECUWTAOTUL00170</a>	TAOTUL00170	12	PKG	13153	12.346	PARTS OF F	TUL					20-JAN-2023	

To view the charges on your invoice, click on the View Charges button.

Pick Up Requirements

Status	Shipped from STG See shipping information below for more details.	Print Proof of Pickup
Pick Up Number (Job-Lot Number)	20187946-01	<b>View Charges</b>
Customs Release	Required at destination	Way Receipt
Freight Release	01/19/23	Guarantee Charges
Delivery Order	No	Unrelease
Cargo On Hold	No	Release Marks Hold
Marks Hold	No	Create Alert
Vessel ETA	01/11/23	Insurance Certificate

Base Coverage fee is automatically added.

Charge	Amount
IMP SHIP INS FEE	\$25.00
IMPORT PIER CONG	\$213.96
CFS INBOND DOC	\$10.00
FORKLIFT FEES	\$106.98
TERMINAL FUEL	\$53.49
IMP WAGE ADJ FEE	\$8.00
IMP FACILITY FEE	\$125.00
<b>Total</b>	<b>\$542.43</b>

[Guarantee Charges](#)
[Pay Now](#)
[Back to lot](#)
[Add Insurance](#)

The estimated charges for this lot are if pickup is on 02/02/23.

Charges are based on the best current information but may vary at actual time of warehouse pickup and do not reflect SPECIALTY charges that may apply.

NO PERSONAL CHECKS ACCEPTED. We thank you for your kind cooperation in this matter.

FORKLIFT FEE as of pick up 8/2/2010

\$5.00 cbm/800 lbs (whichever is greater)

Minimum: \$55.00

Leave On Fee: \$50.00

**Base insurance coverage is \$10,000 with zero deductible. Additional Insurance above \$10,000 will be subject to a deductible. Please refer to Insurance Certificate for details.**

To add additional coverage, click on the **Increase Insurance** button. A pop-up will appear where you can add the amount of coverage you need. Click **Get Price**.

Charge	Amount
IMP S	\$25.00
IMPO	\$213.96
CFS IN	\$10.00
FORKL	\$106.98
TERM	\$53.49
IMP W	\$8.00
IMP F	\$125.00
<b>Total</b>	<b>\$542.43</b>

Additional Coverage Amount Above \$10,000:  
\$ 5000 .00

Get Price

Cancel

Increase Insurance Decline Insurance Back to lot

A second pup-up will show Additional Insurance Premium Cost, to add Additional Insurance Coverage click on the Add Additional Insurance green button, to cancel click on Cancel button.

Charge	Amount
IMP ADD INS	\$9.60
IMP SHIP INS	\$25.00
IMPORT PIER I	\$10.00
CFS INBOND I	\$10.00
FORKLIFT FEE	\$50.00
TERMINAL FU	\$15.00
IMP WAGE AD	\$5.00
IMP FACILITY	\$55.00
<b>Total</b>	<b>\$179.60</b>

Additional Coverage Amount Above \$10,000:  
\$ 8000 .00

Additional Insurance Premium Cost: \$9.60

Cancel

Add Additional Insurance

Guarantee Charges Pay Now Back to lot Increase Insurance Decline Insurance

To opt out of all Shield Shippers Insurance, click on the Decline Insurance button, a pop-up will confirm your request, click on the Remove Insurance button. If you choose to keep Shield Shippers Insurance, click the Cancel button.

**Please Note:** Both Base and Additional Shield Shippers Insurance will be removed.

Charge	Amount
IMP SHIP INS	\$25.00
IMP ADD INS	\$9.60
IMPORT PIER CONG @ MINIMUM	\$10.00
CFS INBOND DOC	\$10.00
FORKLIFT FEES @ MINIMUM	\$55.00
TERMINAL FUEL @ MINIMUM	\$20.00
IMP WAGE ADJ FEE	\$5.00
IMP FACILITY FEE	\$55.00
<b>Total</b>	<b>\$179.60</b>

View Total to confirm all Shield Shippers Insurance has been removed.

**Please Note:** Base Shield Shippers Insurance can be added by clicking on the Add Insurance button.

Charge	Amount
IMPORT PIER CONG @ MINIMUM	\$10.00
CFS INBOND DOC	\$10.00
FORKLIFT FEES @ MINIMUM	\$55.00
TERMINAL FUEL @ MINIMUM	\$20.00
IMP WAGE ADJ FEE	\$5.00
IMP FACILITY FEE	\$55.00
<b>Total</b>	<b>\$155.00</b>

To open and View all charges click the PayNow button.

Charge	Amount
IMP SHIP INS FEE	\$25.00
IMP ADD INS	\$9.60
IMPORT PIER CONG @ MINIMUM	\$10.00
CFS INBOND DOC	\$10.00
FORKLIFT FEES @ MINIMUM	\$55.00
TERMINAL FUEL @ MINIMUM	\$20.00
IMP WAGE ADJ FEE	\$5.00
IMP FACILITY FEE	\$55.00
<b>Total</b>	<b>\$189.60</b>



PayNow screen will show all charges including Shield Shippers Insurance, if chosen.  
 Fill in payment fields and click **Submit Payment**.

Order Details		Transportation Detail	
File Lot: 201938-04	Order Number:	Order Number:	
HBL:	Pickup From:	Pickup From:	
MBL: ONEVMAJMB1898850	Deliver To:	Deliver To:	
Entry No:	Signed By:	Signed By:	
AMBL: ALPUNAVLAX0693	Ready Date:	Ready Date:	
Pieces: 22	Pickup Date:	Pickup Date:	
Weight: 346	Delivery Date:	Delivery Date:	
Cubic Meters: 1.515			
Commodity: 100% LYOCCELL SATEN			

Charges	
IMP SHIP INS FEE	\$25.00
IMP ADD INS	\$9.60
CFS INBOND DOC	\$10.00
FORKLIFT FEES @ MINIMUM	\$55.00
TERMINAL FUEL @ MINIMUM	\$20.00
IMP WAGE ADJ FEE	\$5.00
IMP FACILITY FEE	\$55.00
<b>Total Due</b>	<b>\$190.00</b>

Payment	
Address:	Test 1
City:	
State:	
Zip:	
Email:	
Method of Payment	
<input checked="" type="radio"/> Credit Card <input type="radio"/> ACH	
<input type="checkbox"/> <b>Now: No convenience fee charged for ACH Payments</b>	
Credit Card Detail	
Card Holder Name:	
Credit Card Number:	
Expiration Date:	Jan (1)   2021
CVV Number:	
<input type="button" value="Submit Payment"/>	
<small>Please do not select the "submit payment" button more than once.</small>	
<input type="checkbox"/> Credit and debit card transactions will be assessed a 3% convenience fee on the total being paid. By agreeing to the terms of use, users are also acknowledging the assessment of the convenience fee.	
<a href="#">Terms of Use Privacy Policy</a>	

Once Submit Payment is clicked customer will receive an email receipt with payment information and a link to their Insurance Certificate.

FALVEY SHIPPERS INSURANCE		NATIONAL SPECIALTY INSURANCE COMPANY	
<small>Administrated by: Falvey Insurance Group 66 Whitacre Drive, North Kingstown, RI 02882 Tel: 401-932-0244 Fax: 401-461-0272 <a href="http://www.falvey.com">www.falvey.com</a></small>		<small>(4 800) 828-8282 (Outside US) (800) 828-8282 (7) 2900 L. Don Dobbins Dr, Bedford, TX 76022 (817) 285-2000</small>	
<b>Named Insured (Clause 3)</b>	Borer - Simons 17633 Birdie Drive Larkinhaven, RI 043210 United States	<b>Issue Date:</b>	04/07/2021
<b>Shipment Info</b>	<b>Shipment "On/around" Date:</b> 04/06/2021 <b>Total Insured Value:</b> 15,000.00	<b>Policy Number:</b>	FAL-1200013
<b>Loss Payee:</b>	Borer - Simons 17633 Birdie Drive Larkinhaven, RI 043210 United States	<b>Shipment ID BOL / PO Number:</b>	2916026-18
<b>Merchandise Description</b>	Limit (Clause 5) 1,000,000.00 Max COSMETICS	<b>Total Cost:</b>	31.00 <small>Total Cost Includes: 18.00 in Insurance Premium and 13.00 in Program Service Fees</small>
<b>Duration of Insurance</b>	<b>Carrier:</b> Vandervort, Casper and Vandervort Carrier <b>Origin:</b> 187 Laurie Drives New Leonel RI 07227 United States <b>Destinations:</b> 92633 Anya Groves South Abagail NY 10100 United States	<b>Customer:</b>	Borer - Simons Miami Prinsaco 17633 Birdie Drive Larkinhaven, RI 043210 United States
<b>Special Insuring Conditions (Clause 7)</b>	Notwithstanding anything contained herein to the contrary, Underwriters agree, for this policy period only, to waive any rights of subrogation against the Assured (STG Logistics) arising out of the Assured's negligence in loading/unloading and/or shipping of the Insured Goods. This waiver shall not alter, in any way, Underwriters' rights of subrogation against any liable third-party (including but not limited to third-party contractors contracted out by the Assured for the loading/unloading and/or shipping of the Insured Goods).		
<b>Excluded Items (Clause 8.1)</b>	B. accounts; automobiles/motorcycles (defined as licensed road worthy vehicles); bills; Bulk products; cash; checks; COO payments; coins; cotton; currency; deeds; documents; evidence of debt; flowers; fresh foods/produce (excluding frozen foods in reefer trailers); gemstones (loose stones); gift cards; gold silver and other precious metals; grandfather/grandmother clocks; live animals; manuscripts; models (including but not limited to: ships, cars, airplanes and architectural); money orders; neon items; notes; original/fine art valued over \$20,000 per piece; perishable goods or similar property (when not carried or stored in a temperature controlled environment); pharmaceutical drugs; plants; plate/glass; sailboats/motorized boats/yachts; securities and other negotiable papers; tickets; Used engines/motors; windows		
<b>Currency</b>	All references to currency reflect USD		
<b>Contract Forms and Clause</b>	<b>Policy Form:</b> SMP FV09A	<b>Program:</b> STG Logistics	
<small>This policy may be subject to Local Taxes not evident at the time of placing or confirming cover and therefore these terms will be net of any such taxes. This is to certify that the undersigned have arranged insurance as hereinafter specified 80% with National Specialty Insurance Company and 20% with National Casualty Company. The liability of the Underwriters is several and not joint and is limited solely to the extent of their proportions. The Underwriters are not responsible for the subscription of any co-subscribing Underwriter who for any reason does not satisfy all or part of its obligations.</small>			
<small>Issued at North Kingstown, Rhode Island, as per authority granted Falvey Cargo Underwriting, Ltd., this day of April 06, 2021.</small>			
<b>Signature</b>	 J. Michael Falvey President		
<small>FALVEY SHIPPERS INSURANCE, a division of Falvey Cargo Underwriting, Ltd.          Questions relating to filing of a claim, please contact: <a href="mailto:claims@falveycargo.com">claims@falveycargo.com</a> Complaints to be reported to <a href="mailto:complaints@falveycargo.com">complaints@falveycargo.com</a>  <b>Terms and Conditions (Clause 10.1)</b> The Insured agree to indemnify and hold harmless Falvey Shippers Insurance, Falvey Cargo Underwriting Ltd, and Underwriters from any loss, liability, damage or costs, including court costs and attorney fees that they may incur due to misreading, misunderstanding, or failure to follow and adhere to the coverage requirements as per this policy or as endorsed. The Insured is responsible for ensuring the merchandise shipped is in accordance with terms and conditions of this policy and is not an excluded commodity.</small>			



If Shield Shippers Insurance is paid the Insurance Certificate button will remain blue.

Click on Insurance Certificate button and a PDF will appear to display Shield Shippers Insurance coverage information.

### Pick Up Requirements

Status	<b>Not Available</b> Items in red below must be cleared prior to pickup.	<a href="#">Print Arrival Notice</a>
Pick Up Number (Job-Lot Number)	2919398-04	<a href="#">View Charges</a>
Customs Release	<b>Required</b>	<a href="#">ePay Receipt</a>
Freight Release	<b>Required</b>	<a href="#">Guarantee Charges</a>
Delivery Order	No	<a href="#">Release</a>
Cargo On Hold	No	<a href="#">Release Marks Hold</a>
Marks Hold	No	<a href="#">Create Alert</a>
Exchange Pallets	0	<a href="#">Delivery Quote</a>
		<a href="#">Insurance Certificate</a>

If Shield Shippers Insurance is not paid or customer opts out of the Shield Shippers Insurance, the Certificate button will remain gray.

### Pick Up Requirements

Status	<b>Not Available</b> Items in red below must be cleared prior to pickup.	<a href="#">Print Arrival Notice</a>
Pick Up Number (Job-Lot Number)	2919398-04	<a href="#">View Charges</a>
Customs Release	<b>Required</b>	<a href="#">ePay Receipt</a>
Freight Release	<b>Required</b>	<a href="#">Guarantee Charges</a>
Delivery Order	No	<a href="#">Release</a>
Cargo On Hold	No	<a href="#">Release Marks Hold</a>
Marks Hold	No	<a href="#">Create Alert</a>
Exchange Pallets	0	<a href="#">Delivery Quote</a>
		<a href="#">Insurance Certificate</a>

## Logged in User – Guarantee Charges

Click the Guarantee Charges button to open the Guarantee Charges screen.

### Pick Up Requirements

Status	<b>Not Available</b> Items in red below must be cleared prior to pickup.	<a href="#">Print Arrival Notice</a>
Pick Up Number (Job-Lot Number)	<b>2919398-04</b>	<a href="#">View Charges</a>
Customs Release	<b>Required</b>	<a href="#">ePay Receipt</a>
Freight Release	<b>Required</b>	<a href="#">Guarantee Charges</a>
Delivery Order	<b>No</b>	<a href="#">Release</a>
Cargo On Hold	<b>No</b>	<a href="#">Release Marks Hold</a>
Marks Hold	<b>No</b>	<a href="#">Create Alert</a>
Exchange Pallets	<b>0</b>	<a href="#">Delivery Quote</a>
		<a href="#">Insurance Certificate</a>

Follow steps 6 to 9 then continue on step 17.

Fill in required filed and click Process button.

### Guarantee for 20192845-03

Location	Los Angeles
Container Number	<a href="#">UETUS829911</a>
Master Bill of Lading	ONEYSRGC31055700
AMS HBL Number	YASVSRG0014668
House Bill of Lading	SRGLAX02758
Customer Reference	SRGLAX02758
Pieces (Man/Rec/Pit)	46 / CTN / 0 PLT
Weight	540 Lbs
Volume	2.168 CBM
Headload	No
Free Time Expires	
Cargo Description	46 CTNS = 552 PCS OF TO CONTAIN :

Charge	Amount
IMP ADD INS	\$6.00
IMP SHIP INS FEE	\$25.00
IMPORT PIER CONG	\$26.02
CFS INBOND DOC	\$10.00
FORKLIFT FEES @ MINIMUM	\$60.00
TERMINAL FUEL @ MINIMUM	\$20.00
IMP WAGE ADJ FEE	\$8.00
IMP FACILITY FEE	\$125.00
<b>Total</b>	<b>\$280.02</b>

[Increase Insurance](#)
[Decline Insurance](#)
[Back to lot](#)

Base insurance coverage is \$10,000 with zero deductible. Additional Insurance above \$10,000 will be subject to a deductible. Please refer to Insurance Certificate for details.

**Guarantee Charges**

Billing Reference  Required

Dollar Amount:  Required (Limit: \$2500.00)

Enter your First Name  Required

Enter your Last Name  Required

Enter your phone number  Required

Enter your email  Required

Confirm your email  Required

Notes

I have read and agreed to STGUSA's Privacy Policy and Terms and Conditions of Service. [Terms of Service](#). [Privacy Policy](#)

[Process](#) [Cancel](#)