(HAFFA Member Company Letterhead)

**SAMPLE**

Date : DD – MM – YYYY

Hongkong Association of Freight Forwarding And Logistics Ltd. (HAFFA)

8/F, China Hong Kong Centre

122-126 Canton Road

TST, Kowloon

Attn : Ms. Alice Lui – Director

Dear Ms. Lui

**Re : HAFFA Agent Chop Order Placement / Replacement Form**

1. After reading the AISRS guidelines, we would like to place the following chop order:

* Company Full Name (English)^ to be printed on the chop

|  |  |  |
| --- | --- | --- |
|  |  | Same as HAFFA Member Directory |
|  |  | If not the same as HAFFA Member Directory, please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

* No of HAFFA Agent Chop(s): \_\_\_\_\_\_
* Chop No. from \_\_\_\_ to Chop No. \_\_\_\_
* Chop Colour-Company Name: (Choose either one of following colours: “Purple Blue/Red/Black/Green”)
* Company Logo: Yes/No\* (Please circle the appropriate and refer to Point no 1.4 in the AISRS guidelines for the time frame.)
* IATA Agent Code: Yes/No\* (Please circle the appropriate)

***(Please provided with Copy of IATA Agent Certificate if you choose “Yes”)***

1. Reason(s) for chop order placement (Please “tick” at least one box)

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | New Chop | |
|  |  | Lost Chop | |
|  |  | Worn-out (Old chop(s) enclosed with this letter and the chop number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | |
|  |  | Need Extra Chop | |
|  |  | Others, please specify: |  |

1. Please find attached ONE (1) blank company letterhead paper with old chop stamped and marked “sample” for your kind reference.

(If you do not have an old chop sample, please refer to Note 1 below.)

1. Attached please find our cheque number \_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_ drawn from the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bank in the amount of \_\_\_\_\_\_\_\_\_\_ (HK$180.- per Chop)
2. If there is any questions from HAFFA, please contact Mr./Ms. \_\_\_\_\_\_\_\_ at Tel:\_\_\_\_\_\_\_\_\_\_ and Fax : \_\_\_\_\_\_\_\_\_\_or Email : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .
3. I/We understand that the information supplied above is only for HAFFA internal record and I/We are solely responsible for the internal stocking and use of the HAFFA Agent Chop by my/our employees. In respect of Lost Chop, I/We understand neither Airline nor HAFFA will take any responsibility, as Carriers/HAFFA will **NOT** keep track/record of any Lost Chop.  **I/We agree to take full responsibilities of all chops bearing the name of my/ our company.**

Yours sincerely,

For and On behalf of (Company name)

**(Authorized Signature with Authorized Company Chop)#**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name :

Title :

# All forms, official letters and updated record(s) must be signed using authorized signature along with company chop. Authorized signature means any ONE signature from the management listed in the current HAFFA Member Directory. **To protect your cargo, you are kindly requested to login HAFFA Website to update your list of management personnel under "Member Profile" of website.** Kindly note that any last-minute update of management personnel by fax will not be accepted. In case they are not available, signature from the senior management is required and such form must also carbon copy to any ONE name listed in the current HAFFA Member Directory and have his/her signature on the document to be submitted later for our record.

^ Company Full Name (English) means the Member Company Name listed in the current HAFFA Member Directory. In case they are not the same, please apply the Member Company Name Change separately.

Note 1: For order placement without any old chop sample, you need to submit TWO (2) blank company letterhead papers (marked “sample”)

Note 2: To order any new chop in the future, you just need to submit ONE (1) company letterhead paper (stamped the old chop on the paper and marked “sample”)