

Fax: (852) 2753 2888

COSAC-AWB Agent Registration Form

To: membership@hactl.com

Please register our company as a COSAC-AWB the following details:	agent to submit Master Airwaybill for export shipment with
Company Name :	
Company BR Number :	
Hactl Agent Code :	
COSAC-AWB Effective Date :	
Notification Means: ☐ Email; ☐ Fax Number	er (Please tick as appropriate)
1 st email address	1 st Fax number
2 nd email address	2 nd Fax number
3 rd email address	3 rd Fax number
(Maximum three values for each notification means)	
Phone number shown in COSAC-AWB notific	cation:
Contact Person :	Title :
Contact Phone :	Contact email :
This registration shall form an integral part of	leted registration for your company as COSAC-AWB Agent and an attachment to the Hactl Membership Agreement reement.pdf) entered into between your company and Hactl.
Authorized Signature :	Title :
Date :	Company Stamp :

For System Support, please feel free to contact our Customer Support Hotline at 2753-1002 during office hours, or email to service@hactl.com