

Lithium / Sodium Cell and Battery Confirmation Form



Please fill in details and check appropriate boxes and email to: info@upwardpackaging.com

Clear Form

1. **Mode of Transport:** ☐ Air ☐ Marine ☐ Ground
2. **Shipment of:** ☐ Cells ☐ Batteries
3. **Cell/Battery Type:** ☐ Lithium Ion _____ Watt-hour (Wh) rating of largest battery (rechargeable)
☐ Sodium Ion _____ Watt-hour (Wh) rating of largest battery (rechargeable)
☐ Lithium Metal _____ g lithium per battery (primary / one time use)

4. **Battery/batteries are to be sent:**

☐ Individually ☐ Packed with Equipment* ☐ Contained in Equipment*
(eg. Batteries only) (eg. Drill, laptop, drones, etc.)

Net weight of all batteries only : _____ kg
Dimensions of batteries: _____ L" x _____ W" x _____ H"
Dimensions of package: _____ L" x _____ W" x _____ H" - Gross Weight: _____ lbs

☐ Contained in Vehicle*
(eg. e-bike, scooter, wheelchair, etc.)

Net weight of vehicle incl. batteries: _____ kg
Dimensions of package: _____ L" x _____ W" x _____ H"
Gross weight of package: _____ lbs

*** Packed with (or installed in) the equipment/vehicle it is intended to power**

5. **For Lithium or Sodium ion cells/batteries the current state of charge of each cell/battery does not exceed 30% of its rated capacity or 25% of its indicated capacity on the integrated meter** ☐ Yes ☐ No
6. **Is the cell/battery a post-production unit (not a prototype) that has passed UN38.3 testing, and purchased from a retail or online store?** ☐ Yes ☐ No
7. **Is any cell/battery defective/damaged or are these considered waste/for recycling?** ☐ Yes ☐ No

Shipper Information	Recipient Information
Company:	Company:
Address:	Address:
City & Province:	City & Province:
Country:	Country:
Postal Code:	Postal Code:
Contact name:	Contact name:
Email:	Email:
Phone:	Phone:
Tax ID / EIN:	Tax ID / EIN:

If mobile # is provided for recipient then tracking updates / duty payment information may be provided by SMS

Billing Information:

Credit Card information
Card Number:
Expiry:
CVV:

Commodity Information:

	Full Commodity Description (for commercial invoice)			Reason for shipment (eg. sale, testing, personal use, etc.)	
A					
	Country Of Origin	HS Code (If known)	Qty (No. of pieces)	Unit Value (CAD)	Total Value (CAD)
A					

	Full Commodity Description (for commercial invoice)			Reason for shipment (eg. sale, testing, personal use, etc.)	
B					
	Country Of Origin	HS Code (If known)	Qty (No. of pieces)	Unit Value (CAD)	Total Value (CAD)
B					

	Full Commodity Description (for commercial invoice)			Reason for shipment (eg. sale, testing, personal use, etc.)	
C					
	Country Of Origin	HS Code (If known)	Qty (No. of pieces)	Unit Value (CAD)	Total Value (CAD)
C					

	Full Commodity Description (for commercial invoice)			Reason for shipment (eg. sale, testing, personal use, etc.)	
D					
	Country Of Origin	HS Code (If known)	Qty (No. of pieces)	Unit Value (CAD)	Total Value (CAD)
D					

Incoterms	Carrier account # (for duties / taxes)	Add Insurance? (Yes / No)	Insurance Value (CAD)	CERS required? (Yes / No)

Shipments will be detailed as per above on commercial documents, unless otherwise instructed. Destination charges, including – but not limited to - duty & taxes assigned by Customs, will be re-billed to shipper, as applicable. In the event package(s) cannot be delivered and return-to-sender is required, associated freight charges will be re-billed to shipper, as appropriate.

8. I, _____ understand the above and certify that the provided information is correct.
(Print name)

Signature: _____ Date: _____