



## RPG Transportation - Request For Shipment Form

Please complete this form online, print, sign, and return to RPG:  
MS 75-123 or Fax: (510) 486-6939, Office: (510) 486-7652

Shipment #:

Acct #:

Ship To Name:

Address 1:

Address 2:

City, State, Zip:

Phone:

Fax:

Email:

# of Containers in Shipment:

Radionuclide(s)/Activity:

Physical Form:

Solid

Liquid

Gas

Sample Volume/Weight:

Chemical Name:

Attach additional page with chemicals that do not fit into the space above.

Refrigeration Required?

Yes

No

Dry ice, Blue Ice, etc.:

Reason for shipment:

Export controls reviewed? (International Shipments Only)

Yes

No

NA

Date Required at Destination:

Shipment Recipient Notified?

Yes

No

Requestor Name:

Phone:

Authorization Number (RWA):

Container #(s):

I certify above information is correct:

Signature and Date

For RPG use only

Consignee License #

Limits

Expiration Date

NMMSS Material?  Yes  No

Notes: