

Auction Submission Form

Please complete the following form and include with parcels.

I. Contact info

Company: _____

First/Last Name: _____

Office Phone: _____ Mobile: _____

Email: _____

Rapaport Account Number: _____

II. Parcel details

	Seller Reference Number	Carat Weight	Description	Insured Value	Instructions (*)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

(*) Special Instructions: Deep Boil, Boil, Assortment Sorting, CZ Sorting

I am aware that diamonds that have not yet gone through the boiling or sorting process may contain CZ, dirt, and/or unrelated diamond material which Rapaport will need to remove before selling.

Total Insured Value US\$ _____ Date: _____ Signature _____

To be filled out by a Rapaport staff member upon receipt of shipment:

Received by: _____ Signature: _____ Date: _____