

DANGEROUS GOODS NOTE

| | | | | | | |
|-----------|--|-------------------------|--------------------------|-----------------------|----------------------|---|
| Exporter | | 1 | Customs reference/status | | 2 | |
| Your Name | | Booking number | | 3 | Exporter's reference | 4 |
| | | Time & Date of Crossing | | | | |
| | | | | Forwarder's reference | | 5 |

| | | | | | | |
|-----------|--|---------|--------------------------------------------------------------------------------|--------------------|---------------|---|
| Consignee | | 6 | DSHA Notification (in accordance with DSHA Regulations (as amended)) given by: | | | 6 |
| Your Name | | Shipper | Cargo agent | Transport operator | Shipping line | |
| | | | | | | |

| | | | | | |
|-------------------|--|-------------------------------------|-----------------------|--|---|
| Freight forwarder | | 7 | International carrier | | 8 |
| Your Name | | For use of receiving authority only | | | |
| | | | | | |

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|-----------------------------------------------------------------------------------|--|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-----|
| Other UK transport details (eg. ICD, terminal, vehicle bkg. ref. receiving dates) | | 9 | I hereby declare that the contents of this consignment are fully and accurately described below by the proper shipping name, and are classified, packaged, marked and labelled/placarded and are in all respects in proper condition for transport according to the applicable international and national governmental regulations and in accordance with the provisions shown overleaf. The shipper must complete and sign box 17. | | | 10A |
| | | | | | | |

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|------------------|-----------------|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Vessel | Port of loading | 10 | TO THE RECEIVING AUTHORITY -Please receive for shipment the goods described below subject to your published regulations and conditions (including those as to liability). | | |
| Your Destination | | 11 | | | |

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|-------------------|-------------|----|--|--|--|
| Port of discharge | Destination | 11 | | | |
|-------------------|-------------|----|--|--|--|

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|--------|----------------------|----|------------------------|-----|--------------------|----|
| Shipping marks | | Number and kind of packages; description of goods | | 12 | Net wt (kg) of goods | 13 | Gross wt (kg) of goods | 13A | Cube (m3) of goods | 14 |
| SPECIFY; Proper Shipping Name*, Hazard Class, UN No. Additional information (if applicable) see overleaf For RID/ADR/CDG Road requirements see notes overleaf | | XXX Pcs (XXXLtrs) | | XX Kgs | | | | | | |

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|--|-----------|--|----|-----------------------------|---------------------|
| CONTAINER/VEHICLE PACKING CERTIFICATE I hereby declare that the goods described above have been packed/loaded into the container/vehicle identified below in accordance with the provisions shown overleaf. THIS DECLARATION MUST BE COMPLETED AND SIGNED FOR ALL CONTAINER/VEHICLE LOADS BY THE PERSON RESPONSIBLE FOR PACKING/LOADING | | Name of Company | | Your Name | | 15 | Total gross weight of goods | Total cube of goods |
| | | Name/Status of Declaration | | Date | | | | |
| | | Place and date | | Signature | | | | |
| | | Signature of declarant | | | | | | |

| | | | | | | | | | |
|-------------------------------------------------------------|----|-----------------------------|-----|---------------------------------|-----|-----------|-----|------------------------------------------|-----|
| Container identification number/vehicle registration number | 16 | Seal number(s) | 16A | Container/vehicle size and type | 16B | Tare (kg) | 16C | Total gross weight (including tare) (kg) | 16D |
| Registration Number | | Vehicle Type (e.g. Transit) | | | | | | | |

| | | | | | | |
|--------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------|--|----|
| DOCK/TERMINAL RECEIPT HAULIER DETAILS Haulier's name Vehicle reg. no. Driver's signature | | RECEIVING AUTHORITY REMARKS Received the above number of packages/containers/trailers in apparent good order and condition unless stated hereon. Receiving authority signature and date | | Name and telephone no. of shipper preparing this note Name/status of declarant Place and date Signature of declarant | | 17 |
| | | | | Your Name Date Signature | | |

890 Non-completion of any boxes is a subject for resolution by the contracting parties.

LT PRINTING 0151-647 8006
SITPRO APPROVED LICENCEE No. 11

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