

DANGEROUS GOODS NOTE

Exporter (shipper, consignor, sender) PJ Logistics France (Site Ouest) 9023F Rue du Champ Macret, 80700 Roye		1	Customs reference/status _____		2
		3	Booking number _____		4
				Exporter's reference _____	
				Forwarder's reference _____	
Consignee Ingrid Langlois, Cuts, 60400, rue de la Pommeraye. Jerome chardon, OUVÉILLAN, 11590, IMPASSE PASTEUR. Alexandra EL MANSOURI, EYSINES, 33320, Avenue Jean Mermoz, MPS CHILDCARE - Bat C1 Alexandra EL MANSOURI, EYSINES, 33320, Avenue Jean Mermoz, Bat C1 - MPS CHILDCARE Alexandra EL MANSOURI, EYSINES, 33320, Avenue Jean Mermoz, MPS CHILDCARE - Bat C1 Alexandra EL MANSOURI, EYSINES, 33320, Avenue Jean Mermoz, MPS CHILDCARE - Bat C1 Chris Storrar, Bordes-Uchentein, 09900, Route de Sentein, Antonio Lamas, La Norville, 91290, Rue De La Commune De Paris, Debruyne HELENE, CAMPHIN EN CAREMBAULT, 59133, 3 RUE DU 14 JUILLET, Antoine de Camas, Lux, 71100, 2 Rue de Verdun, Rue de Verdun Laurent Dufour, Vimy, 62580, 35 rue de legalite. Transport Maise, FREITAS, Charnay-Macon, 71850, 169 Rue Carnacus, Appartement 2021 Andre Poulard, Abzac, 33230, 6 rue des terres jaunes, Mases, Toulouse, 31100, 275 Route de Seysses, Bat B5 Apt 541		6	DSHA Notification (in accordance with DSHA Regulations (as amended)) given by: _____		6A
		Shipper _____		Cargo agent _____	Transport operator _____
				Shipping line _____	
Other UK transport details _____		7	International carrier _____		8
				For use of receiving authority only _____	
				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 labeled/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.	
Vessel and Port of loading _____		9			10A
Port of discharge and Destination _____		10			
Shipping marks SPECIFY; the UN Number, the Proper Shipping Name*, the Class, the Packing Group. Additional information may be required depending on the mode and/or substance.		11	TO THE RECEIVING AUTHORITY -Please receive for shipment the goods described below subject to your published regulations and conditions (including those as to liability).		
Number and kind of packages; description of goods EFDELTAPro3-EU-CBox UN3480 EcoFlow Battery 5kWh UN3480 DELTAPro-EU-AP UN3480 EcoFlow Battery 5kWh UN3480 Electric Wheelchairs UN3480 Cart Sprayers UN3480 P-AC200L-EU-GY-BL-010 UN3480 Electric Wheelchairs UN3480 Electric Wheelchairs UN3480 Electric Wheelchairs UN3480 Au total: 14 demies palettes		12	Net weight (kg) of goods 65.000KG 65.000KG 60.000KG 65.000KG 60.000KG 60.000KG 60.000KG 60.000KG 45.000KG 50.000KG 50.000KG 50.000KG 45.000KG 50.000KG Au total: 785.000KG	13	Gross weight (kg) of goods _____
		13A	Cube (m³) of goods _____		14
*Proper Shipping Name -Trade names alone are unacceptable.				15	Total gross weight of goods _____
Total cube of goods _____					
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 _____		Name/Status of Declarant _____	
		Place and date _____		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
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 number of shipper preparing this note _____ Name/status of declarant _____ Place and date _____ Signature of declarant _____	

HIBISCUS PLC

