

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 sarl sleco, Souday, 41170, La Beurriere, EARL DEUX MAINS SEMENT, Valensole, 04210, Les Grandes Marges, Oliiva Sylvain, Cazerès, 31220, rue des maraichers, Janine DEVALLAND, Servance, 70440, 12 rue de la Bourgagotte, bernard eric, la rochelle, 17000, 18 avenue de paris, apt n'7 Bosch Gonzague, TOULOUSE, 31200, TENU EURL, 21 Avenue de Fondeyre Le Floch Enzo, Rosporden, 29140, Zone Artisanale de Dioulan, Ambulance Le Floch Emilie GRELIER, Blain, 44130, route de la Frelaudais, Victorien LEPINE, Desvres, 62240, La Houlette Arthur Roche, Voreppe, 38340, Rue du Port, 33 6 20 01 84 87 Denis Jacquet, Aix-les-Bains, 73100, Boulevard de Chantemerle, 0650615647 Transportemaze sarl sleco, Souday, 41170, La Beurriere, Jason Wong, CHEVRAINVILLIERS, 77760, RUE DE MILLY, Baptiste crussion, Puy-Saint-Andre, 05100, route du canal, Laurence Lamothe, Abos, 64360, 2 Pl. du Prat, Place du Prat		6	DSHA Notification (in accordance with DSHA Regulations (as amended)) given by: _____		6A
		Shipper _____		Cargo agent _____	Transport operator _____
				Shipping line _____	
International carrier _____				8	
				For use of receiving authority only _____	
Other UK transport details _____				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 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 _____				10	
Port of discharge and Destination _____				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).	
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.		12	Net weight (kg) of goods _____	13	Gross weight (kg) of goods _____
DELTAPro-1600W-EU UN3480 DELTAPro-1600W-EU UN3480 EFDELTAPro3-EU-CBox UN3480 Electric Wheelchairs UN3480 Electric Wheelchairs UN3480 P-AC200L-EU-GY-BL-010 UN3480 ZMR610-B-EU UN3480 DELTAPro-1600W-EU UN3480 ZDG200-EU UN3480 ZDG200-EU UN3480 EFDELTAPro3-EU-CBox UN3480 P-AC200L-EU-GY-BL-010 UN3480 DELTAPro-1600W-EU UN3480 DELTAPro-1600W-EU UN3480 AC300-EU-BK-BL-00 UN3480 Cart Sprayers UN3480 Au total: 16 demies palettes			59.000KG 59.000KG 61.000KG 36.000KG 36.000KG 45.000KG 50.000KG 59.000KG 46.000KG 46.000KG 61.000KG 45.000KG 59.000KG 59.000KG 41.000KG 36.000KG Au total: 798.000KG	13A	Cube (m³) of goods _____
				14	
*Proper Shipping Name -Trade names alone are unacceptable.					
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 _____		15	
		Name/Status of Declarant _____		Total gross weight of goods _____	
		Place and date _____		Total cube of goods _____	
		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 _____	
				17	

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