

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 Sylvie LANDRIN-VIVIENS, ROISSY EN BRIE, 77680, 34 Rue de Wattribpont, Logt gardien Services Techniques		6	DSHA Notification (in accordance with DSHA Regulations (as amended)) given by _____		6A
		Shipper _____		Cargo agent _____	Transport operator _____
				Shipping line _____	
Freight forwarder Transport mazet		7	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 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.		
Vessel and 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).		
Port of discharge and Destination _____		11			
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 31.600KG Au total: 31.600KG	13	Gross weight (kg) of goods _____
Patient transfer chair UN3480 Au total: 1 demies palettes				13A	Cube (m ³) of goods _____
				14	
*Proper Shipping Name -Trade names alone are unacceptable.				15	Total gross weight 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 _____		Total cube of goods _____	
		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	
HAULIER DETAILS Haulier's name _____ Vehicle reg. no. _____ Driver's signature _____		DOCK/TERMINAL RECEIPT 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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