

DANGEROUS GOODS NOTE

| | | | |
|---|---------------------------|--|--------------------------------------|
| Exporter (shipper, consignor, sender) 1 | | Customs reference/status 2 | |
| PJ Logistics France (Site Ouest) Roye, 80700, 31 Rue de Montdidier, | | Booking number 3 26030149 | Exporter's reference 4 |
| | | Forwarder's reference 5 | |
| Consignee 6 | | DSHA Notification (in accordance with DSHA Regulations (as amended)) given by: 6A | |
| Gertine van Wolfswinkel 31-+31652300059 Stroe, 3776LX, Breveenseweg 20. | | Shipper | Cargo agent |
| | | Transport operator | Shipping line |
| Freight forwarder 7 | | International carrier 8 | |
| Transport mazet | | 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. 10A | |
| 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 Number and kind of packages; description of goods 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 |
| Cart Sprayers 3480 Au total: 1 demies palettes | | 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 | | Name and telephone number of shipper preparing this note 17 | |
| 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/status of declarant Place and date Signature of declarant | |

HIBISCUS PLC

