

**DANGEROUS GOODS NOTE**

Exporter (shipper, consignor, sender) <b>1</b>		Customs reference/status <b>2</b>	
PJ Logistics France (Site Ouest) Epinoy, 62860, E-Valley - epinoy,		Booking number <b>3</b> <b>26020148</b>	Exporter's reference <b>4</b>
		Forwarder's reference <b>5</b>	
Consignee <b>6</b>		DSHA Notification (in accordance with DSHA Regulations (as amended)) given by: <b>6A</b>	
sebastien morelli 33-0647224096 Ajaccio, 20000, 1 Rue du Major Lambroschini.		Shipper	Cargo agent
		Transport operator	Shipping line
Freight forwarder <b>7</b>		International carrier <b>8</b>	
Transport mazet		For use of receiving authority only	
Other UK transport details <b>9</b>		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. <b>10A</b>	
Vessel and Port of loading <b>10</b>			
Port of discharge and Destination <b>11</b>		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.		<b>12</b> Net weight (kg) of goods	<b>13</b> Gross weight (kg) of goods <b>13A</b> Cube (m <sup>3</sup> ) of goods <b>14</b>
Square shaped automotive repair endoscope Au total: 1 demies palettes		1.060KG Au total: 1.060KG	
*Proper Shipping Name -Trade names alone are unacceptable.			
<b>CONTAINER/VEHICLE PACKING CERTIFICATE</b> 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 <b>15</b>	Total gross weight of goods
		Name/Status of Declarant	Total cube of goods
		Place and date	
		Signature of declarant	
Container identification number/vehicle registration number <b>16</b>	Seal number(s) <b>16A</b>	Container/vehicle size and type <b>16B</b>	Tare (kg) <b>16C</b> Total gross weight (including tare) (kg) <b>16D</b>
<b>DOCK/TERMINAL RECEIPT</b>		Name and telephone number of shipper preparing this note <b>17</b>	
<b>HAULIER DETAILS</b>		<b>RECEIVING AUTHORITY REMARKS</b>	
Haulier's name		Received the above number of packages/containers/trailers in apparent good order and condition unless stated hereon.	
Vehicle reg. no.		Name/status of declarant	
Driver's signature		Place and date	
		Signature of declarant	

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