

Transport Note

Tel: 01932 345 529 / FAX: 01932 359 959

Haulier: GUEST EXPRESS TRANSPORT



Clover Reference: OI95130

AWB:

Description of Goods UNMANNED VEHICLE AND ACCS

Destination: SHEPPERTON

Pieces: 3 ITEMS

Weight (KG): 3780kg

Dimensions (CM): curtain sider required

2 @ 324 x 204 x 203 & 1 smaller pallet apx 120 x 100 x 103cm

Collection Address: WILLIAMS SHIPPING
MANOR HOUSE AVENUE
MILLBROOK
SOUTHAMPTON
SO15 0LF UK

Collection Contact: LOUIS / CHRIS
Tel: 023 8052 2165

Demander:
(If different to collection
contact)

Collection Date: 22/02/2024

Collection Time: AFTER 1200HRS NEFORE 1600HRS

Delivery Address: CLOVER GLOBAL LOGISTICS
FAIRWATER DRIVE
SHEPPERTON
SURREY
YW17 8EB UK

Attn: NAT - OCEAN
Tel:

Delivery Date 23/02/2024

Delivery Time: AM

Received in good condition by:-

Print Name:

Date:

Signature:

Time:

Clover Shipping is a member of British International Freight Association (B.I.F.A.). All business is transacted subject to B.I.F.A. Trading Conditions 2017 details of which can be seen on our website at www.clovershipping.com, or a copy can be sent upon request. Company Registration Number - 2840067 (registered in England) Registered Office- Unit A302, Vickers Drive North, Brooklands Industrial Park, Weybridge, Surrey, KT13 0YU, United Kingdom

Transport Details

Please Tick

Two Man?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
ITAR?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
HAZ / DG?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If "YES", please Specify Details		
Special Equipment?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
If "YES", please Specify Details		
Section 5?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
P/M?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Other Special Requirements?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
If "YES", please Specify		
Tail Lift Required?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Service Level?	<input type="checkbox"/> NEXT DAY	
	<input checked="" type="checkbox"/> SAME DAY	
	<input type="checkbox"/> OTHER	
If "Other", please Specify		

DEDICATED OVERNIGHT AM DELIVERY

Please note; this form MUST be completed in full, before it can be accepted and processed by the Transport Department