

MAX
EXPRESS COURIER SERVICES LLC
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TRN : 100062788300003



* 3 8 2 4 0 9 7 *

(Tracking/Waybill number)

Track Your Shipments

SENDERS REFERENCE

ORIGIN

DESTINATION

DESTINATION HUB

CONSIGNOR / SHIPPER'S DETAILS

Name: *Sherif Bay*
Contact Person: *Mr. Jacob*
Building Name: *10-64*
City: *Dubai* Street: *10-64*
Tel.: *055 1106177* Mob.: *055 1106177*

CONSIGNEE / DELIVERY DETAILS

Name: *SAVILL CITY*
Contact Person: *Mr. Jacob*
Building Name: *10-64*
City: *Dubai* Street: *10-64*
Tel.: *055 1106177* Mob.: *055 1106177*

CHARGES

COURIER CHARGES
OTHERS
VAT 5%

Mode Of Courier Charge

☐ PREPAID ☐ CAD ☐ BILL THIRD PARTY
☒ COD ☐ COC ☐ A/C NUMBER

Collection Date:

10-64

Delivery Date:

303

Name: *303* Signature: *303*

MATERIAL COST TO COLLECT

SPECIAL INSTRUCTION

Delivered by MAX Name: *303* Employee ID: *303*

I/We Received the Shipment in Good Condition
Name: *303* Date: *303*

Signature

If the Consignee refuses to pay, the courier Charges will be invoiced to the shipper. A/C (NON NEGOTIABLE) Proof of Delivery (POD) any enquiry should be clarified with in 3 months from date of shipment.
White: Office copy, Yellow: POD, Green: A/C Copy, Blue: Receiver Copy, Pink: Sender Copy