## **Multimodal Dangerous Goods Form**

1 Shipper/Consignor/Sender (full style address is mandatory)		2 Transport document number BOOKING NO: 911131607			
		Page 1	4 Shipper's referen	ce	
			5 Freight Forwarde	er's reference	
6 Consignee		Carrier: MAERSKLINE			
		SHIPPER'S DECLARATION  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 government regulations.			
8 This shipment is within the limitations prescribed for:		9 Additional handling info	ormation		
	CARGO ONLY				
10 Vessel and Voyage number	11 Port of loading				
12 Port of discharge	13 Destination				
14 Shipping Marks *Number a	nd kind of packages; description	of goods	Total Gross mass (kg)	Net Mass (kg)	Total Cube(m3)
UN Number: Proper Shipping Name: Technical Name: Class: Sub Risk (if a PG: Marine Pollutant: No of outer package quantity an No of inner package quantity an Other details including packagi Net. Weight (kg): Gross. Weight (kg): EMS code: IMO label: MFAG number: Emergency contact person nam Emergency contact person num Limited Quantity: Sepoisonous inhalation hazard:  Other Details/Container count: 15 Container Number *	Flashpoint:  nd type: nd type: ng details, cargo description etc e: ber: gregation Group:	, 17 Container size & type		Total cube (m3)	
CONTAINER PACKING CERTIFICATE I hereby declare that the goods described above have been placed/loaded into the container/vehicle identified above in accordance with the applicable provisions.  **MUST BE COMPLETED AND SIGNED FOR ALL CONTAINER/VEHICLE LOADS BY PERSON RESPONSIBLE FOR PACKING/LOADING		21 RECEIVING ORGANIZATION RECEIPT Received the above number of packages/containers/trailers in apparent good order and condition, unless stated hereon: RECEIVING ORGANIZATION RE-MARKS:			
20 Name of company(stamp & signature are mandatory)		Haulier's name	22 Name of company (OF SHIPPER PREPARING THIS NOTE) (stamp & signature are mandatory)		
Name/status of declarant*		Vehicle reg no.	a.Name/status of declarant*		
Place and date*		Signature and date	b.Place and date*		
Signature of declarant*		DRIVER'S SIGNATURE	c.Signature of declarant*		
* DANGEROUS GOODS You must specify proper shippi mandatory requirements, under 5.4.1. ** For the purpose of the Fields which are marked with (*)	r applicable national and intern IMDG Code see 5.4.2.				

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			4 Shipper's reference		
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15. Container identification No./ Vehicle registration No.	16. Seal number(s)	17. Container/vehicle Size & type	18. Tare mass (kg) 19. Total gross (including tare) (kg)		
20 Name of company(stamp & signature are mandatory)			22 Name of company (OF SHIPPER PREPARING THIS NOTE) (stamp & signature are mandatory)		
Name/status of declarant*		Vehicle reg no.	Name/status of declarant*		
Place and date*		Signature and date	Place and date*		
Signature of declarant*		DRIVER'S SIGNATURE	Signature of declarant*		
* DANGEROUS GOODS  Von must creatly prepay shipping name hererd class. UN No. Peakaging group (where assigned) Marine pollutant and observe the					

You must specify proper shipping name, hazard class, UN No., Packaging group, (where assigned) Marine pollutant and observe the mandatory requirements, under applicable national and international governmental regulations. For the purpose of the IMDG Code see 5.4.1. \*\* For the purpose of the IMDG Code see 5.4.2. Fields which are marked with (\*) are mandatory.