# Dangerous Goods Declaration Note To be completed by the Shipper and Haulier Prior to shipment



	Southampton to East C	outhampton to East Cowes East Cowes to Sout							nampton			Booking Reference Number:							
			_																
SHIPPER HAULIER																			
	Name:								Name:										
	Address:								Address:										
Telephone No.									Telephone No.										
Name of Ship: Sailing Da															Sailing Time:				
	Type of Vehicle:														Vehicle Reg:				
P T P	Description of Goods lease give correct ECHNICAL description. roprietary names alone are ot sufficient	se give correct Class of HNICAL description. Goods				Flashpoint If 61 °C or under closed cup		No. an Type o Packa		f	Packaging Group			Volu	ross Weight or plume of Goods upties to be marked			Net Weight of Explosive Content of Class 1 Other than safety explosives	nt

#### **SPECIAL INFORMATION IS REQUIRED FOR:**

(A) Substances and Articles in Classes 1 and 2\_

(B) Infectious Substances (Class 6.2) \_

(C) Radioactive Materials (Class 7) – 7 DAYS NOTICE REQUIRED

(D) Dangerous Goods in limited quantities \_

see International Maritime Dangerous Goods Code

### **DANGEROUS GOODS DECLARATION**

I hereby declare that the contents of this consignment are fully and accurately described above by the correct technical name(s) (proper shipping name(s) that the shipment is packaged in such a manner as to withstand the ordinary risks of handling and transport by sea to and from the Isle of Wight having regard to the properties of the goods to be carried, and that the goods are classified, packaged, marked and labelled in accordance with the requirements of the Merchant Shipping (Dangerous Goods and Marine Pollutants) Regulations 1998 (a) as currently amended.

Name & Status of Declarant:

Signature of Declarant:

Date:

## **SHIP USE ONLY**

Stowage Position of Vehicle:

COPY TO BE SENT BY MASTER OF VESSEL TO RED FUNNEL FREIGHT DEPARTMENT