

Dangerous Goods Declaration Form

Shipper Details

Name

Address

Contact Number

Consignee Details

Name

Address

Contact Number

Transport Details

Flight/Vessel No.

Date of Departure

Port of Loading

Port of Discharge

Dangerous Goods Information

Proper Shipping Name

Class/Division

UN Number

Packing Group

Quantity & Type of Packing

Additional Information

Certification

Name of Signatory

Title

Date

Signature

