

Dangerous Goods Shipping Document

Shipper's Address:			Consignee's Address:					
Date:			Waybill #:					
		Regulated D	angero	us Good	S			
24-Hour Number:			ERAP Reference:					
UN Number		Shipping Name	Primary Class	Sub Class	Packaging Group	Toxic by Inhalation		# of Container
"I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are properly classified and packaged, have dangerous goods safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the Transportation of Dangerous Goods Regulations." Shipper Name								
		Non-Regulated	l Dange	erous Go	ods			
# of Pa	ckages	Description					Total Weight (KG/L)	