

Dangerous Goods Transport Document & Container Packing Certificate

OOCL Booking Number : _____ Exporters Reference : _____
1st Vessel / Voyage: _____ Forwarders Reference : _____ Page _____ of _____ Pages
2nd Vessel / Voyage: _____
3rd Vessel / Voyage: _____ Shipper's Name & Address : _____
4th Vessel / Voyage: _____
Place of Receipt : _____
Port of Loading: _____
Transshipment Port 1: _____
Transshipment Port 2: _____
Transshipment Port 3: _____ Consignee's Name & Address : _____
Port of Discharge: _____
Final Destination : _____
Container Number & Type : _____
OOCL Seal Number : _____

Dangerous Goods Details :-

Item : Proper Shipping Name ⁽¹⁾ : _____
1 Base Chemical or Fumigant
(If applicable) : _____
For containers under fumigation : Date of fumigation : Amount of fumigant :
(Instructions for disposal to be attached)
IMO Classification ⁽²⁾ : UN number : Outer Packaging (Number & Type) :
Flashpoint (If 61 Deg C or below) : Deg C. Inner Packaging (Number & Type) :
(If applicable)
Marine Pollutant* : **Yes / No** Packaging Group* : **I / II / III** Gross Weight (Kgs) :
EMS Number : Net Weight (Kgs) :
(If applicable)
For USA Only :- Net Explosive Content :
Reportable Quantity Weight (Kgs) : Weight (Lbs) : (For explosive substances only)
Poison Inhalation Hazard* : **Yes / No** If Yes, Please indicate Poison Inhalation Hazard Zone* : **A / B / C / D**
Emergency Contact Party : And 24 hour Emergency Phone No. :
OOCL Dangerous Goods Reference Number : Local Category (e.g. MPA Class) :

* Delete as applicable. (1) Trade names not acceptable. (2) Secondary classification also required, If applicable.

For temperature controlled Containers / Tanks :- Controlled / Set Temperature : Deg C

Emergency Temperature : Deg C

OOCL Dangerous Goods Approval Authority :

Shippers Declaration

I hereby declare that the contents of this consignment are fully and accurately described above by the Proper Shipping Name, and are classified, packaged, marked and labeled/placarded and are in all respects in proper condition for transport according to the applicable international and national government regulations. This declaration must be completed, signed and dated by the consignor.

: Name of Company :

: Name / Status of Declarant :

: Place and Date :

: Signature of Declarant :

Container Packing Declaration

I hereby declare that the goods described by this and any attached dangerous goods note & container packing certificate have been packed/loaded into the container identified above in accordance with the provisions of the IMDG Code paragraphs 5.4.2.1 or 7.5.2.7.

Must be completed and signed for all container loads by person Responsible for packing/loading the container.

Missing information may lead to container being rejected for shipment.

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Dangerous Goods Items Continuation Sheet

OOCL Booking Number :	Exporters Reference :			
1st Vessel / Voyage:	Forwarders Reference :	Page	of	Pages
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Container Number & Type :				
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Dangerous Goods Details :-

Item :	Proper Shipping Name ⁽¹⁾ :	
	Base Chemical or Fumigant (If applicable) :	
IMO Classification ⁽²⁾ :	UN number :	Outer Packaging (Number & Type) :
Flashpoint (If 61 Deg C or below) :	Deg C.	Inner Packaging (Number & Type) : (If applicable)
Marine Pollutant* : Yes / No	Packaging Group* : I / II / III	Gross Weight (Kgs) :
EMS Number :		Net Weight (Kgs) : (If applicable)
<i>For USA Only :-</i> Reportable Quantity <input type="checkbox"/> Weight (Kgs) :	Weight (Lbs) :	Net Explosive Content : (For explosive substances only)
Poison Inhalation Hazard* : Yes / No	If Yes, Please indicate Poison Inhalation Hazard Zone* : A / B / C / D	
Emergency Contact Party :	And 24 hour Emergency Phone No. :	
OOCL Dangerous Goods Reference Number :	Local Category (MPA Class) :	
* Delete as applicable.	(1) Trade names not acceptable.	(2) Secondary classification also required, If applicable.

Dangerous Goods Details :-

Item :	Proper Shipping Name ⁽¹⁾ :	
	Base Chemical or Fumigant (If applicable) :	
IMO Classification ⁽²⁾ :	UN number :	Outer Packaging (Number & Type) :
Flashpoint (If 61 Deg C or below) :	Deg C.	Inner Packaging (Number & Type) : (If applicable)
Marine Pollutant* : Yes / No	Packaging Group* : I / II / III	Gross Weight (Kgs) :
EMS Number :		Net Weight (Kgs) : (If applicable)
<i>For USA Only :-</i> Reportable Quantity <input type="checkbox"/> Weight (Kgs) :	Weight (Lbs) :	Net Explosive Content : (For explosive substances only)
Poison Inhalation Hazard* : Yes / No	If Yes, Please indicate Poison Inhalation Hazard Zone* : A / B / C / D	
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