

Dangerous Goods Shipping Document

CONSIGNOR:						For BCF Office Use Only					
CONSIGNOR ADDRESS:						BCF Consignee:					
CONSIGNOR ADDRESS.					Address: Phone:						
LICENSE PLATE #:Province: Contact Name						1 11011	c				
						FV: PO#:					
		Description	of Dangerous	Goods (ALL FIE	LDS MUST BE F	ILLED or N/A)					
		Class (Division)	Packing		Marine	Toxic by	Toxic by Total				
UN Number	Proper Shipping Name	Sub-Class or	Group or	Flashpoint	Pollutant	Inhalation	Quantity	Quantity	EMS Codes		
Number		Compatibility	Infectious	Class 3 only (Celsius)	Y/N	Y/N	(Example:	L/KG/NEQ/ # of			
		group, if applicable	Category	(Ceisius)			3 x 250L drums)	articles (Example: 750 L)	F	S	
								(Example: 750 E)			
24 Hour Number (provided by the customer):											
				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, l	nave Dange	erous Goods	s safety marks affi	xed or displayed a	s applica	ble	
For BCF Office Use Only:				and are in all respects in proper condition for transport according to the							
				Transportation of Dangerous Goods Regulations.							
24 hour number CANUTEC: 1-888-226-8832											
Operations and Security Centre (OSC):				Consignor/Shipper's Name (PRINT):							
Time of sailing:											
Vessel:				Consignor/Shipper's Signature:							
Destination Terminal:											
Vehicle Type (closed/open/tank, etc.):				Shipping dat	Shipping date:						