

CARTER'S NOTE

| | |
|---|--------------------------------------|
| Container Number: | Vessel Name: |
| ISO/Equipment Type: | Voyage Number: |
| Shipper/Line Operator: | Commodity: |
| Booking Number: | Tranship Port: |
| Verified Gross Mass (VGM) Weight: kg | Port of Discharge/Final Destination: |
| Seal 1: | Seal 2: |

DESCRIPTION OF GOODS, NUMBER AND KIND OF PACKAGES, REMARKS

| Description of Goods/Remarks: | Number | Type of Items: |
|-------------------------------|--------|----------------|
| | | |

| | | |
|--|------------------|--|
| Carriage Temp (°C) | Dangerous Goods: | Over Dimension: (Yes / No): Over Width (cm) Left Over Width (cm) Right Over Height (cm) |
| Vent Setting & Unit: | UN Number: | |
| Humidity (Control) %: | Class: | |
| Container must be back on Power by: Date: / / Time: Hr (24hr Clock) | | |

RECEIVED FOR SHIPMENT

| TRANSPORTING COMPANY | | CUSTOMER | |
|----------------------|----------------------|---------------------|-------|
| Co.Name _____ | _____ | Co.Name _____ | _____ |
| Person _____ | _____ | Person _____ | _____ |
| Signature _____ | _____ | Signature _____ | _____ |
| Date _____ | _____ | Date _____ | _____ |
| ORIGINAL | TERMINAL COPY | CARTERS COPY | |

I certify that the weight of the container(s) provided is the verified gross mass (VGM) of the container(s) as determined in accordance with Rule 24B.4 of the Maritime Rules, and that I am an authorised signatory of the shipper.

VGM Verifier's Name

Company

Signature

Date