



DANGEROUS GOODS BOOKING APPLICATION

REFERENCE NUMBER :		
1	VESSEL NAME / VOYAGE NUMBER :	
2	NUMBER SIZE AND TYPE OF CONTAINERS :	
3	PORT OF LOADING :	
4	TRANSHIPMENT PORT (IF ANY) :	
5	TRANSIT PORTS :	
6	PORT OF DISCHARGE :	
7	IMO CLASS / UN NUMBER :	
8	PROPER SHIPPING NAME :	
9	TECHNICAL NAME (IF N.O.S.) :	
10	SUBSIDIARY RISK :	
11	PACKING GROUP :	
12	MARINE POLLUTANT (No / P / PP) :	
13	FLASH POINT (IN CENTIGRADE) :	
14	LIMITED QUANTITY (YES/NO) :	
15	TYPE, NUMBER AND CAPACITY OF INNER PACKING :	
16	TYPE, NUMBER AND CAPACITY OF OUTER PACKING :	
17	UN PACKING CODE INNER / OUTER :	
18	TOTAL GROSS / NET WEIGHT (KGS) :	
19	EMERGENCY SCHEDULE :	
20	SEGREGATION GROUP (if applicable) :	
21	24 hour EMERGENCY RESPONSE TELEPHONE NUMBER :	
22	SHIPPER :	
23	CONSIGNEE :	
ADDITIONAL DETAILS FOR CLASS 1		
1	SHIPPER'S FULL STYLE :	
2	CONSIGNEE'S FULL STYLE :	
3	SHIPPER'S CONTACT PERSON :	
4	CONSIGNEE'S CONTACT PERSON :	
5	NET EXPLOSIVE WEIGHT PER CONTAINER :	
LAND TRANSPORTATION		
1	ORIGIN : (CITY, STATE, COUNTRY)	
2	FINAL DESTINATION : (CITY, STATE, COUNTRY)	
3	WASTE (YES/NO)	
SHIPPER OWNED TANK CONTAINER		
Please attach Tank Certificate from Competent Authority.		