

# LORD HOWE ISLAND SEA FREIGHT PTY LTD

ACN 055 641 908 • ABN 86 055 641 908  
 c/- Post Office Lord Howe Island NSW 2898 Australia  
 Phone: (02) 6563 2222 Fax: (02) 6563 2222

## TAX INVOICE

**SENDERS DECLARATION  
 NO DANGEROUS GOODS  
 CONSIGNMENT NOTE FOR  
 M.V. "ISLAND TRADER"**

Please receive for shipment in M.V. "Island Trader" the cargo listed below, subject to the conditions of carriage listed on the back of this form. I certify that the goods **do / do not** contain any **hazardous** or **prohibited goods**. e.g. Explosives, Flammables, Corrosives.

• **A false declaration is an offence**

Shipper's Signature \_\_\_\_\_

Date \_\_\_\_\_

Shipper \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Consignee \_\_\_\_\_

Address \_\_\_\_\_

Delivery Instructions \_\_\_\_\_

**CHARGE**

Shipper

Consignee

*Tick one*

C/N No.: \_\_\_\_\_

Date \_\_\_\_\_

Consignment Note to be made out in triplicate and presented with goods.

Shipping space should be pre-booked.

1<sup>st</sup> Copy - Consignee

2<sup>nd</sup> Copy - Agent (L.H.I)

**INSURANCE IS THE RESPONSIBILITY OF THE CONSIGNEE**

Total No.	Description	Weight (Kgs)	Width Length Height	M <sup>3</sup>	General	Cooler	Freezer	Rate \$	Freight \$

RECEIVED FOR SHIPMENT in apparent good condition (unless otherwise herein stated) the said total numbers and quantity of containers or other packages or units indicated herein (measurement, weight, quantity, brand, contents, condition, quality and value as declared by the shipper but unknown to the Carrier) and to be carried, subject to the exceptions, terms and provisions hereinafter mentioned, to the Port or such other alternative port or place as is provided hereinafter or as near thereto as she may safely get, lie and discharge and there to be discharged subject as aforesaid in the like order and condition. Delivery of goods to be made to the Consignee named above or his or their assigns.

IN WITNESS whereof the Master or any person authorised by the Master has signed this Consignment Note at the place and date hereinafter specified.

Master/Authorised Agent \_\_\_\_\_  
 Date \_\_\_\_\_  
 Place \_\_\_\_\_

\*Ship Freight \$ \_\_\_\_\_  
 \*Delivery \$ \_\_\_\_\_  
 Fuel Levy \$ \_\_\_\_\_  
 GST \$ \_\_\_\_\_  
 LHIB \$ \_\_\_\_\_  
**Total** \$ \_\_\_\_\_

**CARGO BOOKINGS** I have read & understand the conditions of carriage.  
 Contact: Mark Turner • Phone: 0417 892 642 • Fax: 02 6583 1740

\* Indicates Taxable Supply