

**Submit to: Shared Services, Distribution Services
Materials Management Building
Phone: 780.492.4121 Fax: 780.492.8268**

CONTACT INFORMATION

Consignee Name:

Date:

Address:

City:

Province:

Carrier:

Postal Code:

Waybill#:

Additional Handling Information:

In Case of Emergency Call: UAlberta Control Centre 780.492.5555

Authorization

I hereby declare that the contents of this consignment are fully and accurately described below by the proper shipping name, are properly classified and packaged, have dangerous good safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the Transportation of Dangerous Goods regulations.

Shipper's Name

Signature

Date: _____

DETAILS

NO. PCS	PROPER SHIPPING NAME	CLASS	SUBCLASS	UN NO.	PG	QUANTITY