

بيان الشحن / Way Bill

Job No	5054395	Customer Reference No.	
Bayan No	Bill of lading (B/L) No.	Port of Destination:	Vessel Name:
	MEDUPX673486		
Sender Name & Address:		Receiver Name:	
Nawara Transport & Freight Co (NTF)			
Print Date	05-04-2024		
Customer Name & Address	AATCO Food Industries S.L. Co	Mobile#	
Delivery Date	Pickup From	Loading Place	Delivery address
	Dammam port		JEDDAH
Container Number:	F5M11160186		
Seal Number:			
Container Type:	40 FT FLAT BED		
Remarks			
Community			
Truck No.		Driver Name	
Driver mobile No.		Signature	
1 - PARTIALLY ABOVE DECLARED BY SHIPPERS AND LIABILITY TO ATTACHEE HERE WITH WHAT SO EVER 2 - SUBJECT TO NTF STANDARD TERMS & CONDITIONS		1 - التواصيل المذكورة أعلاه غير أنها التأمين وعدم مسؤولية طرفه هذا بأي شيء غير المتعلق 2 - يخضع للشروط وأحكام شركة نواره النقل والشحن التابعة	
Driver Signature توقيع السائق		Prepared By اخذ من قبل	

مكان الاستلام PLACE OF RECEIPT		مكان التسليم PLACE OF DELIVERY	
التاريخ Date	الوقت Time	التاريخ Date	الوقت Time
وصول ARRIVAL		وصول ARRIVAL	
تحميل LOADED		تفريغ OFF LOADED	
خروج EXIT		خروج EXIT	
وقوف BREAKS STOPPAGES		وقوف BREAKS STOPPAGES	
<p>Received the above cargo container in good condition while the seal intact. استلمنا الحاوية المذكورة أعلاه بحالة جيدة مع العزل سليم</p> <p>Name of receiver: اسم المستلم كامل</p> <p>Signature: التوقيع</p> <p>Stamp: الختم</p> <p>7/4</p>			



**KANOO TERMINALS SERVICES LTD**  
 Logistics With Logic  
 P.O. Box 1309 - Dammam 31431 - Saudi Arabia  
 Tel: +966 13 8573161 (10 Lines) - Fax: 013 8576230  
 Email: info@kanooterminals.com

**EQUIPMENT INTERCHANGE RECEIPT**

شركة كانو لتبادل معدات مراكب الشحن الممدودة

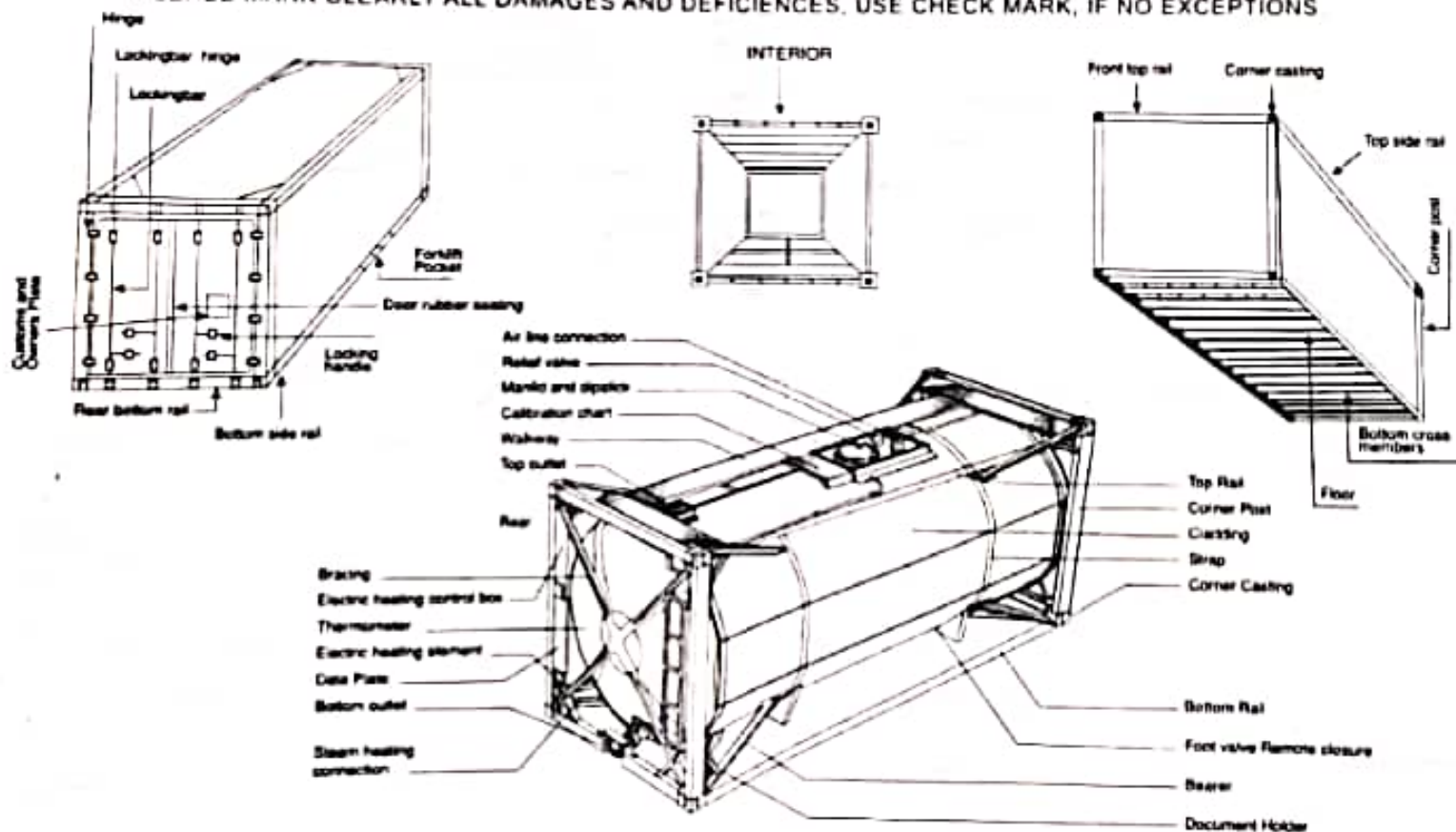
ص.ب 1309 - الدمام 31431 - المملكة العربية السعودية  
 تليفون: +966 13 8573161 (خطوط 10) - فاكس: 013 8576230  
 البريد الإلكتروني: info@kanooterminals.com



EIR NO: 6242696

LOCATION CODE MEDiterranean SHIPPING COMPANY SAUDI		MOVEMENT		PREFIX	SERIAL	CD
Kta_depot	IN AVAILABLE	OUT / DELIVERED			MSMI 116018	6
LESSEE'S NAME		STATUS	IN DAMAGED	BILL OF LADING NO.		
		AV Empty				
EQUIPMENT DESCRIPTION		DRY BOX		CSC		
20' TYPE	MGW	TW	SEAL	<input type="checkbox"/> ACEP MARKED <input type="checkbox"/> CSC VALID DATE / / (COMPLETE DATE OUT ONLY)		
TRUCKER DETAILS		OTHER DETAILS		SERVICE REQUIRED		
9254				REPAIR	<input type="checkbox"/>	
				CLEANING	<input type="checkbox"/>	
				PARTS MISSING	<input type="checkbox"/>	
THIS EQUIPMENT WAS DELIVERED/RECEIVED AS NOTED ABOVE						
DELIVERED BY:		TIME & DATE	RECEIVED BY:		TIME & DATE	
SIGNED	9254	12/04/24	SIGNED	KTS	12/04/24	
PRINT NAME		317	PRINT NAME		317	
REMARKS:						
OK						

PLEASE MARK CLEARLY ALL DAMAGES AND DEFICIENCIES. USE CHECK MARK, IF NO EXCEPTIONS



THE GATE EIR IS FOR ADMINISTRATIVE PURPOSE ONLY IN THE EVENT THE EQUIPMENT REQUIRES REPAIR OR CLEANING AS PER THE INSPECTION CRITERIA DEFINED BY THE OWNER OR OPERATOR OF THE EQUIPMENT A DETAILED COST ESTIMATE SHALL BE FORWARDED TO THE OWNER/ OPERATOR WHO WILL ASSESS LIABILITY OF REDELIVERING PARTY OR OTHER PARTIES CONCERNED.

Form no : TH-F1-01 Revision no : 01