Transport documentation

**Supplier** **Recipient**

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip code, city: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip code, city: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(To be filled in by carrier/driver)**

**Name (driver, carrier):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Transportation device (Silo wagon, articulated truck, etc.):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Registration plate:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Towing vehicle 1. Trailer/ 2. Trailer

**Quantity delivered:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **t** **Delivery note no.:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Crop type:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Variety:** \_\_\_\_\_\_\_\_\_\_\_ **Origin:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Field/Warehouse designation)

**Details of the last three tours**

Product category according to annex „Measures for Cleaning/Disinfection“(1. = last tour, 2. = second last tour, 3. = third last Tour) and note cleaning and disinfection measures, respectively.

Product- Cleaning Detergent Disinfectant

category none dry wet

1. \_\_\_\_\_\_\_\_\_\_\_\_\_ O O O O \_\_\_\_\_\_\_\_\_\_ O\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_ O O O O\_\_\_\_\_\_\_\_\_\_ O \_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_ O O O O\_\_\_\_\_\_\_\_\_\_ O \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location, date Signature (carrier, driver)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(To be filled in by the shipping agent)**

Name (shipping agent): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Transportation device sifted before loading: O yes O no

Transportation device clean and dry before loading: O yes O no

The shipping space was checked by visual control and was accepted without complaints.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location, date Signature (Shipping agent)

/ Diesen Absatz bitte nicht löschen. Inhalt bitte vor diesem Absatz /

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