

Shipper SHEVCHUK EVGENY HAR HAZAN 3/2 DIMONA			HOUSE BILL OF LADING # 308016 A. UNIVERS TRANSIT LTD. ***** ASHDOD 77140, ISRAEL TEL:972-8-8563145 FAX:972-8-8563387 Web-Site: www.univers-transit.co.il		
Consignee FALER DEMITRY 204 BOONE CRESCENT, KLEINBURG L4H4V1 ONTARIO CANADA			RECEIVED in apparent good order and condition except as otherwise noted the total number of containers or other packages or units enumerated below.		
Notify Brytor International Moving 8375 rue Bombardier Anjou, Quebec H1J1A5 Canada Contact: Amed Tala Email: amed@ims.crytor.ca			FOR DELIVERY PLEASE APPLY TO: BRYTOR INTERNATIONAL MOVING 11111 TWIGG PL #1019 RICHMOND. BC. V6V 3C9		
Vessel MSC BEIJING	519	Port-of-Load. HAIFA	905-5648855		
Port-of-Discharge MONTREAL, QU			905-5648841		
Final-Destination			Org/Cpy		
		Freight payable at ORIGIN\ PP	Bills of Lading: COPY		

Marks & Numbers	Number	Kind	Descr. of Goods	Weight	Volume
FALER DEMITRY	1	PACKAGES	USED HOUSEHOLD GOODS EXPRESS WAYBILL	872	5.57
TOTAL	1		TOTAL	872.00	5.57

Remarks : 	12/05/25 Date A. UNIVERS TRANSIT Stamp & Signature
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P<ISRSHEVCHUK<<EVGENY<<<<<<<<<<<<<<<<<<<
36957101<8ISR7801077M33012143<0728770<6<<<26

 Signature du titulaire

Pour être valide, ce passeport doit être signé ci-dessus par le titulaire, sauf si le titulaire est un enfant âgé de moins de 16 ans.

A black and white portrait of a man with short, dark hair and a mustache. He is looking slightly to his right. The image is oriented horizontally on the page.

Type/Type	Issuing Country/Pays émetteur
PP	CAN

Given names/Prénoms

Nationality/Nationalité

Date of birth/Date de naissance

Place of birth/Lieu de naissance

Date of issue/Date de délivrance

Date of expiry/Date d'expiration

Authority/Autorité

NORTH YORK

Sex/Sexe **M**

100-447600-100
100-447600-100

[illegible]

יֵשׁוּעַ הַשֵּׁם בַּמְּלֹאָא
אוֹ הַשֵּׁם הַקֹּדֶם

Maiden name

Passport valid for

All countries כל הארצות

הדרכון תקף ל

Signature of bearer

On receipt of passport
sign here



חתימת בעל הדרכון

בקבלך את הדרכון
חתום כאן 

amended - see page _____ שונה - ראה עמוד _____

PASSPORT

דרכון

STATE OF ISRAEL

מדינת ישראל

Type / שד
P / ת

Code of State / סמל המדינה
ISR

Passport No. / מס' דרכון
24810875

שם משפחה
פלר

שם פרטי
דמיטרי

אזרחות

ישראלית

I.D. No. / מס' זהות
3-0705463-5

מקום לידה

ברית המועצות

Date of expiry / תאריך פקיעת תוקף
20/03/2030

סימכות - ממונה דרכונים ב-
טורונטו

Surname
FALER

Given name
DEMITRY

Nationality
ISRAELI

Date of birth / תאריך לידה
04/05/1979

Sex / מין	Place of birth
M / ז	USSR

Date of issue / תאריך תוצאה
21/03/2025

Authority - I.C. Passport at-
TORONTO

P<ISRFALER<<DEMITRY<<<<<<<<<<<<<<<<<<<<<<<<<<<
24810875<3ISR7905045M30032083<0705463<5<<<98



**A. UNIVERS
TRANSIT** Ltd.
Cargo Packing & Logistics

PACKING INVENTORY

Shipper Name: SHEVCHUK EVGENY
Packing Job Date: 23 Apr 2025
Origin Address: Israel
Destination Address: Canada



Packed Items

Package#	Item	Comment	Wrapping	Room
1	Clothes		Medium Box	-----
2	Clothes		Medium Box	-----
3	Clothes		Medium Box	-----
4	Clothes		Medium Box	-----
5	Clothes		Medium Box	-----
6	Clothes		Medium Box	-----
7	Clothes		Medium Box	-----
8	Clothes		Medium Box	-----
9	Clothes		Medium Box	-----
10	Clothes		Medium Box	-----
11	Clothes		Medium Box	-----
12	Clothes		Medium Box	-----
13	Clothes		Medium Box	-----
14	Clothes		Medium Box	-----
15	Clothes		Medium Box	-----
16	Clothes		Medium Box	-----
17	Clothes		Medium Box	-----
18	Clothes		Medium Box	-----
19	Clothes		Medium Box	-----
20	Clothes		Medium Box	-----
21	Clothes		Medium Box	-----
22	Clothes		Medium Box	-----
23	Clothes		Medium Box	-----
24	Clothes		Medium Box	-----
25	Clothes		Medium Box	-----
26	Clothes		Medium Box	-----
27	Clothes		Medium Box	-----
28	Clothes		Medium Box	-----
29	Clothes		Medium Box	-----
30	Clothes		Medium Box	-----
31	Clothes		Medium Box	-----

Shipper Signature on packing

Foreman Signature on packing

Shipper: SHEVCHUK EVGENY
23 Apr 2025

Foreman: Ilya Musienko
A. Univers Transit Ltd.

Shipper Signature on delivery

Name: _____

Date: _____

Delivery Driver Signature

Name: _____

Company: _____



**A. UNIVERS
TRANSIT** Ltd.
Cargo Packing & Logistics

32	Clothes	Medium Box	-----
33	Clothes	Medium Box	-----
34	Clothes	Medium Box	-----
35	Clothes	Medium Box	-----
36	Clothes	Medium Box	-----
37	Clothes	Medium Box	-----
38	Clothes	Medium Box	-----
39	Clothes	Medium Box	-----
40	Clothes	Medium Box	-----
41	Clothes	Medium Box	-----
42	Clothes	Medium Box	-----
43	Clothes	Medium Box	-----
44	Clothes	Medium Box	-----
45	Kitchenware	Book/Small Box	-----
46	Piano	Wrapped	-----
47	Suitcase	Wrapped	-----
48	Speaker	Wrapped	-----
49	Speaker	Wrapped	-----
50	Chair	Wrapped	-----
51	Stand	Wrapped	-----
52	Guitar	Wrapped	-----
53	Fishing Rod	Wrapped	-----
54	Table	Wrapped	-----
55	Table	Wrapped	-----
56	Chair	Wrapped	-----
57	Carriage	Wrapped	-----
58	Stand	Wrapped	-----
59	Basket (Clothes)	Wrapped	-----
60	Chair	Wrapped	-----

Total Number of Packages: 60

Used Boxes Count

Box Type	Quantity
Book/Small Box	1
Medium Box	44
Wrapped	16

Shipper Signature on packing

Shipper: SHEVCHUK EVGENY

23 Apr 2025

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Delivery Driver Signature

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Name: _____

Date: _____

Name: _____

Company: _____



Canada Customs
and Revenue Agency

Agence des douanes
et du revenu du Canada

PROTECTED (when completed)

PERSONAL EFFECTS ACCOUNTING DOCUMENT
(Settler, Former Resident, Seasonal Resident, or Beneficiary)

Accounting Document No.

☐ Shaded areas for
customs use only

Importer's Name
Demistry Faler

Importer's Address
**204 Boone Crescent,
Kleinburg, L4H4V1,
Ontario, Canada**

Cargo Control No.

Country of Origin
ISRAEL

Country of Export
ISRAEL

Landed Immigrant / Permanent Resident
Resident

Port of Entry
Resident

Date of Landing

IMM 1000 No.

Customs Stamp

Item	Description of Goods (Include serial numbers, if applicable)	Value (CDN Dollars)
1	piano electric, electronic drums,	
2	photographs, jackets, clothes, men's things	
3	women's things.	
4		
5		
6		
7		
8		

All conveyances MUST be eligible for importation in accordance with Transport Canada requirements.
Vehicle import registration fees may also apply.

Conveyances (make, model, serial number of vehicle, vessel, aircraft, or trailer)	Value (CDN Dollars)	K22 / Vehicle Import Form No.
1		
2		
3		

Additional List of Goods ☐ Form B4A ☒ Mover's Inventory ☐ Other Goods to Follow ☐ Yes ☒ No Form B15 No. (if applicable)

CLASSIFICATION TYPE - See information on reverse

☐ FORMER RESIDENT (tariff item No. 9805.00.00)

I hereby declare that I have read and qualify for the provisions of tariff item No. 9805.00.00 and that:

- ☒ I have been a resident of another country for at least one year, or
- ☐ I have been continuously absent from Canada for at least one year, and
- I left Canada on _____; and
- I returned to Canada to resume residence on _____.
- With the exception of wedding gifts, bride's trousseau, alcoholic beverages and tobacco products or replacement goods described in the Tariff item No. 9805.00.00 Exemption Order, all household and personal effects imported or to be imported by me under this tariff item have been actually owned, possessed, and used abroad by me for at least six months prior to the date of my return to Canada to resume residence.
- All goods imported are my personal or household effects and were not used abroad for any commercial purpose nor will they be used in Canada for any commercial purpose.
- If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time.

☐ BENEFICIARY (tariff item No. 9806.00.00)

I hereby declare that I have read and qualify for the provisions of tariff item No. 9806.00.00 and that I am a beneficiary of personal and household effects which were bequeathed to me without remuneration as:

- ☐ The result of the death of _____ a resident of _____ who died on _____; or
- ☐ In anticipation of the death of _____ who resides in _____.

I have attached:

- ☐ A copy of the will, showing that I am a beneficiary of the estate;
- ☐ A signed statement from the donor outlining the circumstances of the gift; or
- ☐ A statement from the executor of the estate or other legal representative of the donor outlining the circumstances of the gift.

☐ SEASONAL RESIDENT (tariff item No. 9829.00.00)

I hereby declare that I have read and qualify for the provisions of tariff item No. 9829.00.00 and that:

- I arrived in Canada to occupy my seasonal residence for the first time on _____.
- All goods imported or to be imported by me under this tariff item have been in my ownership, possession, and use prior to my first arrival in Canada to occupy my seasonal residence.
- All goods imported are my personal or household property and they will not be used in Canada for any commercial purpose.
- If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time.
- I have not previously claimed the benefits of tariff item No. 9829.00.00.

☐ SETTLER (tariff item No. 9807.00.00)

I hereby declare that I have read and qualify for the provisions of tariff item No. 9807.00.00 and that:

- I am entering Canada with the intention of establishing, for the first time, a permanent residence for a period in excess of 12 months and I arrived in Canada on _____.
- With the exception of wedding gifts, bride's trousseau, alcoholic beverages and tobacco products described in the Tariff item No. 9807.00.00 Exemption Order, all household and personal effects imported or to be imported by me under this tariff item have actually been owned, possessed, and used abroad by me prior to the date of my arrival in Canada.
- All goods imported are my personal or household property and they will not be used in Canada for any commercial purpose.
- If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time.

Signed at _____ on _____

Faler
Signature of Importer



A. UNIVERS TRANSIT LTD.

CONTACT INFORMATION FORM

When you ask us to take care of your relocation we kindly request you to fill in this form and return it to us.

Client	Account	Job number
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Loading address / details

Dimona Har Hazon 2/3

Address of destination / details

Canada 204 Boone Crescent,
Kleinburg L4H4V4
Ontario, Canada

Phone 1		Phone 1	
Phone 2		Phone 2	+1 (437) 237-8066
Phone cell		Phone cell	
Facsimile		Facsimile	shenchukergeniya@gmail.com
Email (very important)	shenchukergeniya@gmail.com	Email (very important)	
Date you depart from this address		Date you arrive at this address	

It is very important that we (or our agent) know where we can reach you during transit of your shipment. Please advise details below. You can, for instance, also give us the address of an employer or relatives where you will be staying.

Contact address / details 1)

Contact address / details 2)

Phone 1		Phone 1	
Phone 2		Phone 2	
Phone cell		Phone cell	
Facsimile		Facsimile	
Email (very important)		Email (very important)	
We can reach you at this address from - till		We can reach you at this address from - till	

Request date(s) of loading

Timing of shipping of your goods	A.S.A.P. AFTER PACKING	AT MY CALL	ON A CERTAIN DATE:
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Service requested		FULL-SERVICE INTO NEW RESIDENCE
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Place	Date 22.4.25	Signature
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