

SEA WAYBILL OF LADING FOR PORT TO PORT OR COMBINED TRANSPORT



ZIM Integrated Shipping Services Ltd

SHIPPER / EXPORTER (NAME & ADDRESS) KARIV DANIEL HAIM SHAY AGNON 22 HERZELIA	BOOKING No. ZIMUASH4236613/1	WAYBILL No. ZIMUASH4236613
	SPECIAL AGREEMENT: This Waybill is not a bill of lading and no bill of lading will be issued. The contract of carriage evidenced by this Waybill is deemed to be a contract of carriage as defined in Article 1(b) of the Hague Rules and Hague-Visby Rules (as applicable) and for shipments to or from or through the U.S.A., this Waybill shall be subject to U.S. COGSA which Act shall by this contract also apply to this Waybill as if this Waybill were a non-negotiable straight bill of lading, however this Waybill is not a document of title to the Goods. Delivery pursuant to this non-negotiable waybill will be made to the Consignee named, or his agent, on production of proof of identity at the Port of Destination or final Destination (if contracted for), whichever applicable without surrender or delivery of this waybill.	

CONSIGNEE (NAME & ADDRESS) KARIV DANIEL HAIM 3514 INTERNATIONAL DR NW WASHINGTON, DC 20008 USA	FORWARDING AGENT F.M.C. No.
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(NON-NEGOTIABLE)	POINT AND COUNTRY OF ORIGIN (FOR SHIPPER'S REFERENCE ONLY)
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NOTIFY (NAME & ADDRESS) FLATRATE INTERNATIONAL 27 BRUCKNER BLVD BRONX, NY 10454 TEL:718 4755786 EXT.137QLL7 INTERNATIONAL@FLATRATE.COM	REMARKS / EXPORT OR OTHER INSTRUCTIONS Reference:FILE:306265 SHIPPED ON BOARD 05/05/2021 CY/CY Forwarder Reference: 51901
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* FOR DEFINITION SEE CLAUSE 1 OVERLEAF	INITIAL CARRIAGE	PLACE OF RECEIPT OF GOODS * (IF CONTRACTED FOR)		
	VESSEL * ZIM QINGDAO	VOY. 93/W		PORT OF LOADING * ASHDOD
	PORT OF DESTINATION * NEW YORK, NY	FINAL DESTINATION * (IF CONTRACTED FOR)		FURTHER ROUTING (AT SHIPPER'S EXPENSE, RISK AND RESPONSIBILITY)

PARTICULARS AS FURNISHED BY SHIPPER

MKS & NOS. / CONT. NOS.	DESCRIPTION OF GOODS	WEIGHT	MEASUREMENT
CONT:TEMU5070243 1 CNT SEAL: 135241 /DV20 (CY/CY)	44 PACKAGES USED HOUSEHOLD GOODS PASSPORT # 34768131 SHIPPER'S LOAD STOWAGE & COUNT CONT TARE WEIGHT 2200	KGS 1,500.00	M3 15.00
1	CONT TOT. TARE : 2,200	CARGO W TOTAL 1,500.00	15.00

**WAYBILL
NOT NEGOTIABLE**

DETAILS	RATE		FREIGHT	
	PER	AMOUNT	PREPAID	COLLECT
SEAWAY B/L - NO ORIGINAL ISSUED				
AD VALOREM FREIGHT				

SHIPPER'S DECLARED VALUE OF GOODS: If shipper enters a value, Carriers "package" limitation of liability shall not apply and ad valorem freight will be charged (See Clause 21)

NOTE: Received in apparent good order and condition, unless otherwise stated herein, the Goods or packages or Containers said to contain the units and amount of Goods specified herein for carriage subject to the terms and conditions hereof (including the terms and conditions of the reverse side hereof and the terms and conditions of the Carrier's Tariff Rules) from the Place of Receipt or the Port of Loading (whichever is applicable) to the Port of Discharge or the Place of Delivery (whichever is applicable). The Shipper agrees and acknowledges that the weight, measure, marks, numbers, quality, contents seal(s) number and value of the Goods as declared are unknown to and not admitted by the Carrier, but that the Carrier has relied upon the Shipper's representation as to the number of packages stated herein. If the acknowledged tally is of Containers, this indicates that the Container has been packed and sealed by the Shipper at his premises without the Carrier being represented and able to check or verify either the tally of Goods or the stowage, which are consequently unknown to him. In accepting this Waybill the Shipper expressly accepts and agrees to be bound by all the terms, stipulations, exceptions, limitations, liberties and conditions stated herein, whether written, printed, stamped or otherwise incorporated on the front and/or reverse side hereof as well as the provisions of the Carrier's Tariff Rules, Regulations and Schedules, without exceptions, as fully as if they were all signed by the Shipper, and the Carrier's undertaking to carry the Goods is made on the basis of the Shipper's acceptance and agreements as aforesaid.

IN WITNESS of the contract contained herein this Waybill has been signed by or on behalf of Zim Integrated Shipping Services Ltd. (as Carrier).

FREIGHT PAYABLE AT
ASHDOD

PLACE AND DATE OF ISSUE
ASHDOD on 05/05/2021

Without prejudice to the generality of the foregoing, the Shipper's attention is drawn to the fact that the terms of the Bill of Lading are continued on reverse side hereof and include limitations of liability in respect of loss or damage to the goods and delay. In addition, attention is drawn, inter alia, to Clauses 7 (Notice of Loss, Time Bar), 13 (Shipper Declarations), 19 (Lien), 14 (Dangerous and Hazardous Goods) and 22 (Law and Jurisdiction). The Package limitation mentioned in Clause 21 will not be applicable in the event that contents are carefully declared, itemized, valued by the Merchant prior to loading and Ad Valorem Freight is paid or contracted for.

**ZIM ISRAEL LTD.
AS AGENTS FOR
ZIM INTEGRATED SHIPPING SERVICES LTD (AS CARRIER)**

IN VIEW OF THE DANGER OF CONFISCATION, WARRANTED VESSEL NOT TO CALL AT PORTS AND NOT TO ENTER THE TERRITORIAL WATERS OF ANY ARAB COUNTRIES BELONGING TO THE STATE OF ISRAEL AND/OR ACTIVELY SUPPORTING THE ARAB BOYCOTT, PRIOR TO UNLOADING AT PORT OF DESTINATION UNLESS IN DISTRESS OR SUBJECT TO FORCE MAJEURE.

ISF Information

ISF Number SV8-38057147677	Reference Number 306265	ISF Type ISF-10
Importer		Consignee
Shipment Type 03 - Household Goods/Personal Effects		
		Time Accepted 5/10/21 9:46:58 AM

Bills of Lading

Carrier:	Mode of Transportation: Vessel, Container	
Bill Type	Bill Number	Bill on File
Straight/Regular/Simple Bill	ZIMU ASH4236613	Yes

Selling Party

KARIV DANIEL
 Street Number: 22
 Street Name: SHAY AGNON
 HERZELIA, IL

Buying Party

KARIV DANIEL
 Street Number: 3514
 Street Name: INTERNATIONAL DR NW
 WASHINGTON , DC 20008, US

Ship to Party

KARIV DANIEL
 Street Number: 3514
 Street Name: INTERNATIONAL DR NW
 WASHINGTON , DC 20008, US

Container Stuffing Location

KARIV DANIEL
 Street Number: 22
 Street Name: SHAY AGNON
 HERZELIA, IL

Consolidator

A UNIVERS TRANSIT
 Street Number: 14
 Street Name: HADARIM
 ASHDOD, IL

Manufacturer

KARIV DANIEL
 Street Number: 22
 Street Name: SHAY AGNON
 HERZELIA, IL

Part Number	Tariff Number	Country of Origin
	980400	IL

Consignee

KARIV DANIEL HAIM DUNS/DUNS+4: 34768131

POWER OF ATTORNEY (To Clear My Personal Effects Shipment through U.S. Customs)

Section 141.45, Title-19, United States Code of Federal Regulations requires a Custom House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

To expedite clearance of your shipment and to comply with U.S. regulations, please complete the information requested below:

KNOW ALL MEN BY THESE PRESENTS: That, (shipper's full name) Kariv Daniel Haim

residing at 38 1/2 N [unclear]

hereby constitutes and appoints the following Customs House Brokers: _____

as a true and lawful agent and attorney of the grantor named above for and in the name, place, and stead of said grantor

from this date and in Customs District _____ and in no other name to make endorse, sign, declare, or swear to any entry, withdrawal, declaration, certificate, bill of lading or other document required by law or regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor; to perform any act or condition which may be required by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said grantor;

To make endorsements on bills of lading conferring authority to make entry and collect drawback, and to make, sign, declare, or swear to any statement supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacturer, certificate of manufacturer and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in said district or in any other customs district;

To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported without benefit of drawback, or in connection with the entry, clearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds which may be voluntarily given and accepted under applicable laws and regulations, consignee's and owner's declarations provided for in Section 485, Tariff Act of 1930, as amended, or affidavits in connection with the entry of merchandise;

To sign and swear to any documents and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said grantor;

And generally to transact at the customhouses in said district any and all custom business, including making, signing, and filing of protests under Section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interest and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything, whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby satisfying and confirming all that the said agent and attorney shall lawfully do by

virtue of these presents; the foregoing Power of Attorney to remain in full force and effect until the _____

day of _____, in the year of _____ or until notice of revocation in writing is duly given to and received by a District Director of Customs of the district aforesaid. If the donor of this Power of Attorney is a partnership, said power shall in no case have any force or effect after the expiration of 2 years from the date of its receipt in the office of the District Director of Customs of the said district.

IN WITNESS WHEREOF, the said (shipper's full name) _____ has caused these presents to be signed:

Date: 3 04/13/21

Signature: [Signature]

Witness # 1: _____

Witness # 2: _____

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

DECLARATION FOR FREE ENTRY
OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

FORM APPROVED OMB NO 1851-0014 Exp. 01-31-2016

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1851-0010. The estimated average time to complete this application is 45 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street NW Washington DC 20226.

PART I - TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Please consult with the CBP official for additional information or assistance. REMEMBER-All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle) Kavil Daniel Heim	2. IMPORTER'S DATE OF BIRTH 05/08/1997	3. IMPORTER'S DATE OF ARRIVAL 05/02/2021
4. IMPORTER'S U.S. ADDRESS	5. IMPORTER'S PORT OF ARRIVAL JFK	6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN LY001
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.)		

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VESSEL/CARRIER	C. FROM (Country)	D. B/L OR AWB OR I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS	F. MARKS AND NUMBERS			

PART II - TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES

9. RESIDENCY ("X" appropriate box) I declare that my place of residence abroad <input checked="" type="checkbox"/> is <input type="checkbox"/> was	A. NAME OF COUNTRY	B. LENGTH OF TIME Yr. Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input type="checkbox"/> (1) Returning resident of the U.S. <input checked="" type="checkbox"/> (2) Nonresident	<input type="checkbox"/> a. Emigrating to the U.S.	<input type="checkbox"/> b. Visiting the U.S.

10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES (The undersigned further declares that ("X" all applicable items and submit packing list):

A. Applicable to RESIDENT and NONRESIDENT <input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA) <input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA)	C. Applicable to NONRESIDENT ONLY <input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA) <input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)
B. Applicable to RESIDENT ONLY <input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)	

PART III - TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States; and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S. 2021	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON:
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PART IV - TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item C on the reverse.)

A. For U.S. Personnel, Evacuees, Residents and Non-Residents <input type="checkbox"/> (1) Articles for the account of other person. <input type="checkbox"/> (3) Firearms and/or ammunition. <input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.	B. For Residents and Non-Residents ONLY <input type="checkbox"/> (2) Articles for sale or commercial use. <input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products. <input type="checkbox"/> (6) Fish, wildlife, animal products thereof.	C. For Resident ONLY <input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year. <input type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year. <input type="checkbox"/> (9) Personal effects acquired abroad. <input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP. <input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.
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D. LIST OF ARTICLES

(1) ITEM NUMBER CHECKED IN PART IV, A., B., C	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OF COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP. State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to CBP

PART V - CARRIER'S CERTIFICATE AND RELEASE ORDER

The undersigned carrier, to whom or upon whose order the articles described in PART I, 8., must be released, hereby certifies that the person named in Part I, 1., is the owner or consignee of such articles within the purview of section 484(h), Tariff Act of 1930

In accordance with provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.

1. NAME OF CARRIER	2. SIGNATURE OF AGENT (Print and sign) Date
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PART VI - CERTIFICATION TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY

I, the undersigned, certify that this declaration is correct and complete.

1. "X" One
- A. Authorized Agent* (From facts obtained from the importer) B. Importer

2. SIGNATURE <i>Danid Kariv</i>	3. DATE 04/13/21
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*An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.19, 141.32, 141.33).

PART VII - CBP USE ONLY (Inspected and Released)	1. SIGNATURE OF CBP OFFICIAL	2. DATE
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Department of the Treasury
United State Customs Service

Supplemental Declaration For
Unaccompanied Personal and
Household Effects

1. Owner of Household Goods: (Last Name, First & Middle) Kahiv Daniel Haim

2. Date of Birth 05/08/1991 3. Citizenship Israel

4. Passport Information (Country & Number) Israel 34768131

5. EIN Number _____

6. Resident Alien Number _____

7. U.S. Address International Dr 8. Foreign Address Israel - Tel Aviv

DC - 2008

9. Reason For Moving _____ 10. Employer _____

11. Position with the Company _____ 12. Length of Employment _____

13. Nature of the Business _____

14. Name and telephone number of a company official who can verify the above information
SALEV ORA - 212-551-0432

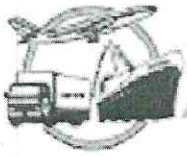
15. Name and address of freight forwarders, packers and shipping agents _____

16. Shipment itinerary (specific place of loading and intermediate ports) _____

17. Certification (circle one) A. Authorized Agent. B. Private

18. Signature Daniel Haim

social
security
number



A. UNIVERS TRANSIT LTD.

ПЕРЕВОЗКА ВЪН ОУСТА...

Shipper Name: Daniel Kariv
Packing Job Date: 26 Apr 2021
Origin Address: Israel
Destination Address: USA

PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Pillows		Large	-----
2	Rugs, Large Roll or Pad		Wrapped	-----
3	Books		Book/Small Box	-----
4	Speaker		Wrapped	-----
5	Bed (Part of)		Wrapped	-----
6	Bed (Part of)		Wrapped	-----
7	Books		Book/Small Box	-----
8	Kitchenware		Book/Small Box	-----
9	Kitchenware		Book/Small Box	-----
10	Kitchenware		Book/Small Box	-----
11	Camping Equipment		Wrapped	-----
12	Camping Equipment		Wrapped	-----
13	Mirror		Wrapped	-----
14	Sports Equipment		Wrapped	-----
15	Kitchenware		Book/Small Box	-----
16	Chair		Wrapped	-----
17	Electronic Piano		Wrapped	-----
18	Rugs, Small Roll or Pad		Wrapped	-----
19	Chair		Wrapped	-----
20	Sports Equipment		Wrapped	-----
21	Decorations		Wrapped	-----
22	Kitchenware		Book/Small Box	-----
23	Kitchenware		Book/Small Box	-----

Owner Signature _____

Company's Signature _____



A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

24	Dryer		Wrapped	-----
25	Table (Part of)		Wrapped	-----
26	Table (Part of)		Wrapped	-----
27	Chest		Wrapped	-----
28	Bed (Part of)		Wrapped	-----
29	Bed (Part of)		Wrapped	-----
30	Cleaning Stuff		Wrapped	-----
31	Table (Part of)		Wrapped	-----
32	Weight Scale		Wrapped	-----
33	Weight Scale		Wrapped	-----
34	Mattress		Wrapped	-----
35	Clothes		Medium Box	-----
36	Office Supplies		Medium Box	-----
37	Chest		Wrapped	-----
38	Table (Part of)		Wrapped	-----
39	Chair		Wrapped	-----
40	Kitchenware		Book/Small Box	-----
41	Kitchenware		Book/Small Box	-----
42	Kitchenware		Book/Small Box	-----
43	Ladder		Wrapped	-----
44	Table (Part of)		Wrapped	-----

Total Number of Packages: 44

Owner Signature _____

Company's Signature _____