

Shipper:

**A.UNIVERS TRANSIT LTD.
INTERNATIONAL MOVERS
77140 ASHDOD TEL: 08-8563145
C/O ALTMAN VALERIE JOY
DERECH YEHUDA PERACH 4
NETANYA**



Carrier's Reference: **57662524** SWB-No.: **HLCUTLV210705947** Page: **2 / 3**

Export References:

Consignee:

**PALMERS RELOCATIONS
13-15 MAYVIC STREET
GREENACRE, NSW 2190
DIANA CROSSLEY
TEL:61-2-96420555 DIANA@
PALMERSRELOCATIONS.COM.AU**

Forwarding Agent:

Notify Address (Carrier not responsible for failure to notify):

**PALMERS RELOCATIONS
13-15 MAYVIC STREET
GREENACRE, NSW 2190
DIANA CROSSLEY
TEL:61-2-96420555 DIANA@
PALMERSRELOCATIONS.COM.AU**

Consignee's Reference:

Place of Receipt:

Vessel(s):

LEVERKUSEN EXPRESS

Voyage-No.:

036E

Place of Delivery:

Port of Loading:

ASHDOD

Port of Discharge:

SYDNEY, NSW

| Container Nos., Seal Nos.; Marks and Nos. | Number and Kind of Packages, Description of Goods | Gross Weight: | Measurement: |
|---|---|----------------------|-----------------------|
| HLBU 2930206 SEAL: 1512546 | 1 CONT. 20'X8'6" GENERAL PURPOSE CONT. SLAC* 111 PACKAGES OF USED PERSONAL EFFECTS | 2300.0 KG | 23.000 MTQ |

*SLAC = Shipper's Load, Stow, Weight and Count

**SHIPPED ON BOARD, DATE : 12/JUL/2021
PORT OF LOADING: ASHDOD
VESSEL NAME: LEVERKUSEN EXPRESS VOYAGE: 036E**

FREIGHT PREPAID

EXPRESS BILL OF LADING..

Shipper's declared Value [see clause 7(2) and 7(3)]

Total No. of Containers received by the Carrier: **1**
Packages received by the Carrier:

Movement: **FCL/FCL** Currency:

| Charge | Rate | Basis | aWt/Vol/Val | P/C | Amount |
|--------|------|-------|-------------|-----|--------|
| | | | | | |

Above Particulars as declared by Shipper. Without responsibility or warranty as to correctness by Carrier [see clause 11]

RECEIVED by the Carrier from the Shipper in apparent good order and condition (unless otherwise noted herein) the total number or quantity of Containers/ Packages or units indicated in the box opposite entitled "Total No. of Containers/ Packages received by the Carrier" for Carriage subject to all the terms and conditions hereof (INCLUDING THE TERMS AND CONDITIONS ON THE REVERSE HEREOF AND THE TERMS AND CONDITIONS OF THE CARRIER'S APPLICABLE TARIFF) 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. In accepting this Sea Waybill the Merchant expressly accepts and agrees to all its terms and conditions whether printed, stamped or written, or otherwise incorporated, notwithstanding the non-signing of this Sea Waybill by the Merchant.

Place and date of issue:

TEL AVIV 12/JUL/2021

Freight payable at:

PREPAID

**FOR ABOVE NAMED CARRIER
CARGO MARINE LTD. (AS AGENT)**

| Total Freight Prepaid | Total Freight Collect | Total Freight |
|-----------------------|-----------------------|---------------|
| | | |

Sea Waybill - Not Negotiable

Sea Waybill - Not Negotiable

Ballindamm 25 - D-20095 Hamburg VAT-ID-No: DE813960018

MTD17312 (FE;;;): SWB-HLAG

90147346 L.V. 06/16

| ----- | | ----- | | ----- | |
|--------------------|-------------------------------|---------|---------|-------|---|
| Cont/Seals/Marks | Packages/Description of Goods | Weight | Measure | | |
| CHARGE | RATE BASIS W/M/V CURR | PREPAID | COLLECT | | |
| ----- | | ----- | | ----- | |
| EQPT TRANSFER ORIG | | X | | | |
| THC ORIGIN | | X | | | |
| CONGEST.SURCH.ORIG | | X | | | |
| MARINEFUEL RECOVER | | X | | | |
| WAR RISK SURCHARGE | | X | | | |
| DOCUMENT FEE | | X | | | |
| THC DESTINATION | | | | | X |
| DEST.DOCUMENT FEE | | | | | X |
| EQUIPM.MAINTEN.FEE | | | | | X |
| LUMPSUM | | X | | | |



Australian Government
 Department of Immigration
 and Border Protection
 Department of Agriculture

UNACCOMPANIED PERSONAL EFFECTS STATEMENT

- This is a legally binding document and may be used as evidence.
- This statement must be completed in English (block letters), with all errors and alterations to be initialed.

WARNING

Do not carry drugs. Penalties for drug offences in Australia are severe. A false or misleading statement to an officer of Customs is an offence and may involve heavy penalties, including forfeiture of any goods concerned.

NOTICE

The Privacy Act 1988 says we must tell you why we are collecting this information, how we will use it and whether you have to give it to us. This information is required to ensure travellers comply with customs, Biosecurity, Health, Wildlife and Currency laws.

We require this information under the Customs Act 1901, the Quarantine Act 1908, the Environment Protection and Biodiversity Conservation Amendment (Wildlife Protection) Act 2001 and the Financial Transaction Reports Act 1988. The Department of Immigration and Border Protection also needs the information to calculate the right amount of duties and taxes. Any questions you do not answer will be asked by an officer of Customs or an officer of the Department of Agriculture. The Department of Immigration and Border Protection and Department of Agriculture are not permitted to disclose this information or any supplementary information you give, except when authorised or required by law.

Please complete the following details

| | |
|--|--|
| Given names <u>Valerie</u> | Family name <u>ALTMAN</u> |
| Address and telephone number of intended or actual Australian residential address <u>8/12 Shinnfield Ave ST IVES NSW 2075</u> | Date of birth <u>29/8/1958</u> |
| Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | Country of issue <u>Australia</u> |
| Passport number <u>PA5895049</u> | |
| Persons covered by this statement: <input checked="" type="checkbox"/> Myself <input type="checkbox"/> Spouse | Name of spouse <u>David ALTMAN</u> |
| Spouse passport number <u>PA5949456</u> | Number of children under 18 years of age |

How I arrived or intend to arrive in Australia

| | |
|---|--|
| On (airline flight number or ship name) | At (port or airport) <u>Sydney</u> |
| Date, or estimated date, of arrival <u>25/7/2021</u> | Country of departure/ <u>Israel / Hong Kong</u> |
| For returning residents only | Period of absence from Australia <u>3 years 11 months</u> |
| Other countries visited <u>Israel</u> | |

How my personal effects arrived or will arrive

- By Mail; or By Air; or By Sea (if by air or sea then complete below)

| | |
|---|--|
| The (number of packages) <u>Approx 120 Boxes</u> | consigned to me have arrived or are due to arrive: |
| On (airline flight number or ship name) | At (port or airport) <input checked="" type="checkbox"/> |
| Container number | Date, or estimated date, of arrival <u>Sept 2021</u> |
| Sea Bill or Air Waybill number | Name of local business handling your personal effects <u>Palmed Relocations</u> |

Clearing your personal effects

You may clear your personal effects or nominate a representative such as a freight forwarder, customs broker, friend or relative to act on your behalf. If you wish to nominate somebody else, you must fill in the details of your nominee in the space provided below.

| | | | | |
|---|----------------|-----|-----------------|------------------|
| Family name | Given names | | | |
| Address | Phone number | | | |
| Your nominee will need to produce the following forms of identification when clearing your goods through customs. | | | | |
| Driver's licence number | Place of issue | and | Passport number | Country of issue |

Declaration

I declare that the above particulars are to the best of my knowledge true and correct.

| | |
|---|-----------------------|
| Signature of owner <u>Valerie Altman</u> | Date <u>8/6/21</u> |
|---|-----------------------|

Important

You must answer each of the following questions by placing a tick (✓) in the appropriate boxes. If you mark YES in any box in sections three to eight or if you are in doubt whether any particular effects should be declared, please give details in the space provided under each question or on a separate attachment if the space is insufficient. Unaccompanied effects may be examined. Please ensure that keys are available at the time of clearance.

Section One

Have you come or are you coming to Australia

As a tourist only? →

To take up temporary residence only? →

To resume permanent residence or as a returning Australian citizen?

To take up permanent residence for the first time?

As an Australian citizen residing overseas, returning temporarily?

Section Two

Did you pack the goods yourself?

Yes

No →

Are you fully aware of the contents of the packages?

Yes

No →

Do the packages contain goods belonging to any person other than you or those who accompanied you on your arrival in Australia?

Yes →

No

Section Three

Do your unaccompanied effects contain any of the following restricted goods?

Drugs of any kind including, but not limited to: DHEA, narcotics, hallucinogens, amphetamines, barbiturates, tranquillisers, steroids or performance enhancing drugs.

Yes No

Weapons including, but not limited to: firearms or parts (including air pistols and air rifles), ammunition, replica firearms, spring bladed knives, daggers, knuckle dusters or martial arts equipment.

Yes No

Articles manufactured from wildlife including, but not limited to: reptiles/snakes, elephants, rhinoceri, members of the cat family, whales, dolphins, zebras, antelope, deer or coral.

Yes No

Material which is likely to cause offence to a reasonable adult. This may include, but is not limited to: child pornographic material, child abuse material, material which may promote, incite or instruct in matters of crime or violence or misuse of a drug, or sexual material (including bestiality).

Yes No

I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.

Signature of owner 

Date

Section Four

Do your unaccompanied effects contain any of the following goods?

Australian and/or Foreign currency in the amount of \$10,000 Australian or more.

Yes No

If yes, please list the amount(s) in Australian dollars

Medicines (whether prescribed by a medical practitioner or not) including but not limited to: herbal.

Yes No

If yes, please provide a list of the goods

Section Five

Do your unaccompanied effects contain any of the following goods? If you tick 'yes' to any question, describe the goods in the table below.

Cigarettes, cigars or tobacco

Yes No

Alcoholic liquor including: spirits, wine or beer.

Yes No

Motor vehicle, motorcycle, trailers or watercraft.

Yes No

Goods belonging to any person other than you or those who accompanied you on your arrival in Australia.

Yes No

Goods for commercial purposes, including goods for sale, lease, hire or exchange.

Yes No

Other goods owned by you for less than 12 months.

Yes No

If insufficient space, attach a separate sheet

| Description | Price or estimated price \$AUS | Date of purchase |
|-------------|--------------------------------|------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

IMPORTANT NOTICE: Any goods owned by you for less than 12 months must be declared. Such goods will be assessed for duty and taxes. Penalties exist for not declaring such goods. For further information please visit our website at www.border.gov.au

Section Six

Within one month prior to shipping these effects to Australia, did you or any member of your family who arrived or will arrive with you, visit a place where farm animals are kept, including farming communities, research farms, sanctuaries and sale yards or visit an abattoir or any meat processing plant?

Yes No

I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.

Signature of owner

[Handwritten Signature]

Date

7/10/24



A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE.

Shipper Name: Altman Valerie
 Packing Job Date: 07 Jul 2021
 Origin Address: Israel
 Destination Address: Australia

PACKING INVENTORY

| No. | Description | Comment | Box Type | Room |
|-----|------------------|---------|----------------|-------|
| 1 | Part Box | | Wrapped | ----- |
| 2 | Documents | | Wrapped | ----- |
| 3 | Documents | | Wrapped | ----- |
| 4 | Documents | | Wrapped | ----- |
| 5 | Documents | | Wrapped | ----- |
| 6 | Documents | | Wrapped | ----- |
| 7 | Electronic Piano | | Wrapped | ----- |
| 8 | Picture | | Standup Box | ----- |
| 9 | Picture | | Standup Box | ----- |
| 10 | Picture | | Standup Box | ----- |
| 11 | Documents | | Wrapped | ----- |
| 12 | Documents | | Wrapped | ----- |
| 13 | Documents | | Wrapped | ----- |
| 14 | Documents | | Wrapped | ----- |
| 15 | Documents | | Wrapped | ----- |
| 16 | Documents | | Wrapped | ----- |
| 17 | Documents | | Wrapped | ----- |
| 18 | Chest | | Wrapped | ----- |
| 19 | CD discs | | Book/Small Box | ----- |
| 20 | CD discs | | Book/Small Box | ----- |
| 21 | CD discs | | Book/Small Box | ----- |
| 22 | CD discs | | Book/Small Box | ----- |
| 23 | Surfing Board | | Wrapped | ----- |
| 24 | Cd Stand | | Wrapped | ----- |
| 25 | Part Of Chest | | Wrapped | ----- |
| 26 | Computer table | | Wrapped | ----- |

Owner Signature _____

Company's Signature _____



A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

| | | | | |
|----|----------------|--|----------------|-------|
| 27 | Computer table | | Wrapped | ----- |
| 28 | Chair, office | | Wrapped | ----- |
| 29 | Chair, office | | Wrapped | ----- |
| 30 | Chest | | Wrapped | ----- |
| 31 | Clothes | | Medium Box | ----- |
| 32 | Books | | Book/Small Box | ----- |
| 33 | Books | | Book/Small Box | ----- |
| 34 | Books | | Book/Small Box | ----- |
| 35 | Pillows | | Large | ----- |
| 36 | Table | | Wrapped | ----- |
| 37 | Table | | Wrapped | ----- |
| 38 | Table | | Wrapped | ----- |
| 39 | Coffee Table | | Wrapped | ----- |
| 40 | Coffee Table | | Wrapped | ----- |
| 41 | TV | | Wrapped | ----- |
| 42 | Shoes | | Medium Box | ----- |
| 43 | Clothes | | Medium Box | ----- |
| 44 | Microwave | | Wrapped | ----- |
| 45 | Lamp | | Wrapped | ----- |
| 46 | Plastic Box | | Wrapped | ----- |
| 47 | Plastic Box | | Wrapped | ----- |
| 48 | Plastic Box | | Wrapped | ----- |
| 49 | Plastic Box | | Wrapped | ----- |
| 50 | Plastic Box | | Wrapped | ----- |
| 51 | Plastic Box | | Wrapped | ----- |
| 52 | Tools | | Wrapped | ----- |
| 53 | Tools | | Wrapped | ----- |
| 54 | Laundry Basket | | Wrapped | ----- |
| 55 | Laundry Basket | | Wrapped | ----- |
| 56 | Blankets | | Wrapped | ----- |
| 57 | Blankets | | Wrapped | ----- |
| 58 | Blankets | | Wrapped | ----- |
| 59 | Chair | | Wrapped | ----- |
| 60 | Plastic Box | | Wrapped | ----- |
| 61 | Shoes | | Medium Box | ----- |
| 62 | Monitor | | Wrapped | ----- |

[Handwritten Signature]

[Handwritten Signature]

Owner Signature _____

Company's Signature _____



A. UNIVERS TRANSIT LTD.

Because we care...

| | | | | |
|----|----------------|--|----------------|-------|
| 63 | Chest | | Wrapped | ----- |
| 64 | Table | | Wrapped | ----- |
| 65 | Table | | Wrapped | ----- |
| 66 | Decorations | | Wrapped | ----- |
| 67 | Decorations | | Wrapped | ----- |
| 68 | Decorations | | Wrapped | ----- |
| 69 | Buffet Cabinet | | Wrapped | ----- |
| 70 | Chair | | Wrapped | ----- |
| 71 | Chair | | Wrapped | ----- |
| 72 | Chair | | Wrapped | ----- |
| 73 | Chair | | Wrapped | ----- |
| 74 | Chair | | Wrapped | ----- |
| 75 | Sofa | | Wrapped | ----- |
| 76 | Guitar | | Wrapped | ----- |
| 77 | Guitar | | Wrapped | ----- |
| 78 | Guitar | | Wrapped | ----- |
| 79 | Guitar | | Wrapped | ----- |
| 80 | Guitar | | Wrapped | ----- |
| 81 | Chair, office | | Wrapped | ----- |
| 82 | Audio System | | Wrapped | ----- |
| 83 | Kitchenware | | Book/Small Box | ----- |
| 84 | Kitchenware | | Book/Small Box | ----- |
| 85 | Kitchenware | | Book/Small Box | ----- |
| 86 | Kitchenware | | Book/Small Box | ----- |
| 87 | Kitchenware | | Book/Small Box | ----- |
| 88 | Kitchenware | | Book/Small Box | ----- |
| 89 | Kitchenware | | Book/Small Box | ----- |
| 90 | Kitchenware | | Book/Small Box | ----- |
| 91 | Kitchenware | | Book/Small Box | ----- |
| 92 | Kitchenware | | Book/Small Box | ----- |
| 93 | Kitchenware | | Book/Small Box | ----- |

[Handwritten Signature]

[Handwritten Signature]

Owner Signature _____

Company's Signature _____



A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

| | | | | |
|-----|-------------|--|----------------|-------|
| 94 | Kitchenware | | Book/Small Box | ----- |
| 95 | Pillows | | Large | ----- |
| 96 | Linen | | Medium Box | ----- |
| 97 | Clothes | | Medium Box | ----- |
| 98 | Chest | | Wrapped | ----- |
| 99 | Chest | | Wrapped | ----- |
| 100 | Chest | | Wrapped | ----- |
| 101 | Books | | Book/Small Box | ----- |
| 102 | Chest | | Wrapped | ----- |
| 103 | Clothes | | Medium Box | ----- |
| 104 | Clothes | | Medium Box | ----- |
| 105 | Clothes | | Medium Box | ----- |
| 106 | Clothes | | Medium Box | ----- |
| 107 | Bed Part | | Wrapped | ----- |
| 108 | Bed Part | | Wrapped | ----- |
| 109 | Bed Part | | Wrapped | ----- |
| 110 | Bed Part | | Wrapped | ----- |
| 111 | Matrass | | Wrapped | ----- |

Total Number of Packages: 111

Owner Signature

Company's Signature
