

Shipper
 GILARRY NATHAN
 MEIR SHAM 7
 JERUSALEM

LINER BILL OF LADING

4023384 1

Reference No. /

Consignee
 PALMERS RELOCATIONS
 52 CHERRY LANE LAVERTON NORTH
 VIC 3026 AUSTRALIA
 ABN 47068349477
 IMPORTS@PALMERSRELOCATIONS.COM.AU



5, PAL-YAM ST., HAIFA 33095 ISRAEL
 TEL. 04-8672270 FAX. 04-8641670

Notify address
 SAME AS CONSIGNEE

For delivery apply to:

ECU WORLDWIDE AUSTRALIA P/L
 SUITE 2, 35-37 TULLMARINE PARK RD
 TULLAMARINE, VIC 3043 AUSTRALIA
 T:61 3 8336 8600

Pre-carriage by*	Place of receipt by pre-carrier*
Vessel ZIM YANGTZE V.3	Port of loading HAIFA, ISRAEL
Port of discharge SINGAPORE PORT	Place of delivery by on carrier* MELBOURNE

Marks and Nos.	Number and kind of packages; description of goods	Gross weight	Measurement
GILARRY NATHAN PALMERS RELOCATIONS AUSTRALIA	2 PALLETS STC: 2 PALLETS OF USED HOUSEHOLD GOODS HS CODE 9905.00 **EXPRESS B/L**	436.00	5.010

Particulars furnished by the Merchant

10/11/24

Clean On Board

Freight details, charges ets. CFS SEGU-519371-9 20RG A124056365	BILL OF LADING RECEIVED by the Carrier the Goods as specified above in apparent order and condition unless otherwise stated, to be transported to such place as agreed, authorised or permitted herein and subject to all the terms and conditions appearing on the front and reverse of this Bill of Lading to which the Merchant agrees by accepting this Bill of Lading, any local privileges and customs notwithstanding. The particulars given above as stated by the shipper and the weight, measure, quantity, conditions, contents and value of the Goods are unknown to the Carrier. In WITNESS, whereof one (1) original BILL of Lading has been signed it not otherwise stated hereafter, the same being accomplished the other(s), it any to be void, if required by the Carrier one (1) original Bill of Lading must be surrendered duly endorsed in exchange for the Goods or delivery order. The contract evidenced by or contained in this bill of Lading is governed by the law of Israel and any claim of dispute arising hereunder or on connection herewith shall be determined by the courts in Haifa and no other Courts. (Terms to continue on back hereof)
Excess value declaration refer to clause 6 (4) (B) + (C) on reverse side.	

Shipped on board	Freight payable at	Place and date issue
Date	PREPAID	10/11/24
Signed by	Number of original Bs/L	Signature
	0	



PACKING INVENTORY

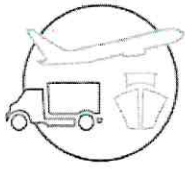
Shipper Name: GILARRY NATHAN
Packing Job Date: 24 Sep 2024
Origin Address: Israel
Destination Address: Australia



Packed Items

Package#	Item	Comment	Wrapping	Room
1	tools		Wrapped	-----
2	tools		Wrapped	-----
3	tools		Wrapped	-----
4	tools		Wrapped	-----
5	tools		Wrapped	-----
6	tools		Wrapped	-----
7	shoes and kitchen tools		Wrapped	-----
8	Pillows		Large Box	-----
9	tools		Wrapped	-----
10	Clothes		Medium Box	-----
11	Clothes		Medium Box	-----
12	Clothes		Medium Box	-----
13	Bathroom items		Medium Box	-----
14	kids bed		Wrapped	-----
15	Bags		Medium Box	-----
16	Bags		Medium Box	-----
17	Picture		Flat Box	-----
18	Decorations		Wrapped	-----
19	Decorations		Wrapped	-----
20	Decorations		Wrapped	-----
21	Decorations		Wrapped	-----
22	Kitchenware		Book/Small Box	-----
23	Kitchenware		Book/Small Box	-----
24	Kitchenware		Book/Small Box	-----
25	Clothes		Medium Box	-----
26	Clothes		Medium Box	-----
27	Clothes		Medium Box	-----
28	Clothes		Medium Box	-----
29	End Table		Wrapped	-----

Total Number of Packages: 29



Used Boxes Count

Box Type	Quantity
Book/Small Box	3
Flat Box	1
Large Box	1
Medium Box	10
Wrapped	14

Shipper Signature on packing

Shipper: GILARRY NATHAN

29 Sep 2024

Foreman Signature on packing

Foreman: Gil Wanderman || AUT

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: _____

Date _____

Delivery Driver Signature

Name: _____

Company: _____



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 initialled.

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 Nathan		Family name Gilary	
Address and telephone number of intended or actual Australian residential address 1/35 Briggs Street Caulfield VIC 3162		Date of birth 13/09/1983	
Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Passport number RA6245029	Country of issue Australia	
Persons covered by this statement: <input checked="" type="checkbox"/> Myself <input type="checkbox"/> Spouse		Name of spouse	
Spouse passport number		Number of children under 18 years of age 1	

How I arrived or intend to arrive in Australia

On (airline flight number or ship name)		At (port or airport) Melbourne airport	
Date, or estimated date, of arrival 6/11/2024	Country of departure France		

For returning residents only

Other countries visited Israel, Belgium	Period of absence from Australia 8 years
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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 consigned to me have arrived or are due to arrive:

On (airline flight number or ship name) CZ0348 - CZ0343	At (port or airport) Melbourne	Date, or estimated date, of arrival
Container number	Sea Bill or Air Waybill number	Name of local business handling your personal effects

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
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Declaration

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

Signature of owner 	Date 13/08/2024
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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 →

<input type="text" value="Name"/>	<input type="text" value="Passport number"/>	<input type="text" value="Relationship to you"/>
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- 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
-

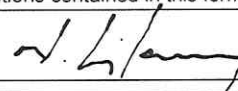
Articles manufactured from wildlife including, but not limited to: reptiles/snakes, elephants, rhinoceri, members of the cat family, whales, dolphins, zebras, antelope, deer or coral.

- 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 those questions are true and correct.

Signature of owner 	<small>Verified by pdfFiller</small> <small>06/06/2024</small>	Date 13/08/2024
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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

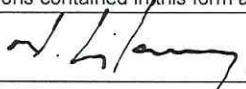
Section Six

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 those questions are true and correct.

Signature of owner



Date

13/08/2024

Section Seven

Do your unaccompanied effects contain any of the following goods, subject to animal biosecurity laws, or wildlife export and import laws?

Animals alive or dead including mammals, reptiles, fish, birds, insects or parts thereof or Animal Products including:

feathers, skins, horns, shells, hatching eggs, semen or embryos.

Yes No

If yes, please provide a list of the goods

Food of any kind (including any edible item) such as:

meat, poultry, eggs, dairy products, baby food, spreads and sauces, beverages and non-alcoholic drinks.

Yes No

If yes, please provide a list of the goods

Equipment used with horses or other animals including:

saddles, harnesses, whips, collars, brushes, blankets or rugs used as animal bedding.

Yes No

If yes, please provide a list of the goods

Biological specimens including:

vaccines, cultures, blood, cell samples or cell lines, semen or embryos.

Yes No

If yes, please provide a list of the goods

Section Eight

Do your unaccompanied effects contain any of the following goods, subject to plant biosecurity laws?

Plants or parts of plants live or dead including:

fruits, nuts, seeds, bulbs, leaves, wooden articles or articles made of plant material, cuttings, flowers, mushrooms, fungi, straw, bamboo, herbs or teas.

Yes No

If yes, please provide a list of the goods

Furniture or other articles of wood, cane or bamboo.

Yes No

If yes, please provide a list of the goods

Soil or earth or goods containing soil, earth, rock or mineral samples.

Yes No

If yes, please provide a list of the goods

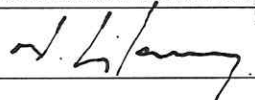
Straw or wood packing material other than wood shavings or sawdust.

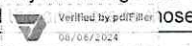
Yes No

Egg or fruit cartons used in packing.

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 those questions are true and correct.

Signature of owner 



Date 13/08/2024

FOR OFFICIAL USE ONLY

Goods declared	Action taken
	ICD number:



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 Nathan Gilarry	Account	Job number 25446/115598
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Loading address / details		Address of destination / details	
Meir Shaham 7 9458226 Jerusalem Israel		1/35 Briggs Street Caulfield VIC 3162 Australia	
Phone 1	+972 556802723	Phone 1	+61 418565880
Phone 2	+972 534535735	Phone 2	
Phone cell		Phone cell	
Facsimile		Facsimile	
Email (very important)	nathan.gilarry13@gmail.com	Email (very important)	nathan.gilarry13@gmail.com
Date you depart from this address	27/09/2024	Date you arrive at this address	6/11/2024


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)	
1, avenue de l'Echevinage 1180 Brussels Belgium			
Phone 1	+32 475552825	Phone 1	
Phone 2		Phone 2	
Phone cell		Phone cell	
Facsimile		Facsimile	
Email (very important)	nathan.gilarry13@gmail.com	Email (very important)	
We can reach you at this address from - till	30/09/2024 to 4/11/2024	We can reach you at this address from - till	

Request date(s) of loading	24/09/2024
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Timing of shipping of your goods	A.S.A.P. AFTER PACKING YES	AT MY CALL	ON A CERTAIN DATE:
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Service requested		<input checked="" type="checkbox"/> FULL-SERVICE INTO NEW RESIDENCE
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Place Jerusalem - Israel	Date 13/08/2024	Signature 
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