

I hereby confirm that the completion of this notification has been done to the best of my knowledge and that the authorized signatory is liable for the accuracy of the declarations contained herein. I acknowledge that we will be liable for damages resulting from any misstatement or omission of shipping information and will fully indemnify Deutsche Post DHL against any liabilities, fines, costs, expenses caused by misrepresentations.

Shipper / Account holder:

Company name: ArminLabs / 	Name:
Company address:	
Telephone:	Mail:

I hereby confirm that the shipment with **Waybill Number:**

- a) **is not** classified as hazardous material, dangerous goods or prohibited article as per ADR/IATA/IMDG or any national or international regulation, e.g. Title 49 CFR
- b) is exempt from transport requirements due to
Special provision: as per: (Please provide appropriate national or international regulation)
- b) **is** classified as hazardous material, dangerous goods or prohibited article as per ADR/IATA/IMDG or any other nation or international regulation, e.g. Title 49 CFR:

UN number: 3373
 Proper shipping name: Biological Substance
 Class: Cat. B
 Packing Group: Medical Express
 Net quantity: 1 (Please provide net qty per inner package, for decision if transport under ADR LQ is possible)

- c) **is** classified as Lithium batteries in compliance with section II of
 - packing instruction 967, less than or equal to 4 cells or 2 batteries (lithium ion battery)
 - packing instruction 970, less than or equal to 4 cells or 2 batteries (lithium metal battery)

Authorization for amendments TDI

I hereby empower qualified and authorized employees of Deutsche Post DHL to

- Amend the entry of the content description field** of the above mentioned Waybill to the following:
- Remove dg contents and/or remove/obliterate wrong DG label.**

Disposal* (may be subject to surcharge):

I hereby empower Deutsche Post DHL to dispose my package in accordance with existing law. (Please be aware that shipments will not be kept longer than 5 days. If we do not receive this statement with 5 business days the shipment will be disposed)

Pick up*

I confirm that the shipment will be picked up by (Please be aware that shipments will not be kept longer than 5 days. If we do not receive this statement with 5 business days the shipment will be disposed)

Name of authorized signatory:
Ms Andrea Foag

Title / Function:
Office

Place, Date of Declaration
Augsburg,

Authorized Signature & Company Stamp

ArminLabs GmbH
 Zirbelstraße 58/3rd floor
 GER - 86154 Augsburg
 www.arminlabs.com



* Please note that all incompliant shipments which will be discovered at origin will be returned to the shipper, if possible.