**Varuanmälan till Gävle Hamn AB**

|  |  |  |
| --- | --- | --- |
| **Fartygets namn** | **Ankomstdatum** | **Anlöp nr** |
|  |  |  |
| **Från** | **Avgångsdatum** | **Kajplats** |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Betalningsansvarig** | **Varuslag** | **Kvantitet** | **Anmärkning** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Datum:** | **Moms** | **VAT nr** |
| ………………………………………………………………………………………Namnunderskrift | Ja [ ] Nej [ ]  |  |

Varuanmälan skickas via e-post till: **trafik@gavlehamn.se**