

**SHIP FROM**  
 Name:  
 Address:  
 City/State/Zip:  
 SID#:

Bill of Lading Number: \_\_\_\_\_  
 BAR CODE SPACE

**SHIP TO**  
 Name: Location #:  
 Address:  
 City/State/Zip:  
 CID#:

CARRIER NAME: \_\_\_\_\_  
 Trailer number:  
 Seal number(s):  
**SCAC:**  
 Pro number:

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name:  
 Address:  
 City/State/Zip:

BAR CODE SPACE  
**Freight Charge Terms:**  
 Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ 3<sup>rd</sup> Party \_\_\_\_\_

**SPECIAL INSTRUCTIONS:**

Master Bill of Lading: with attached underlying Bills of Lading  
 (check box)

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP Y or N		
<b>GRAND TOTAL</b>					

CARRIER INFORMATION						COMMODITY DESCRIPTION		LTL ONLY	
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.	NMFC #	CLASS	
QTY	TYPE	QTY	TYPE						
<b>GRAND TOTAL</b>									

RECEIVING STAMP SPACE

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:  
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_."

**COD Amount: \$** \_\_\_\_\_  
**Fee Terms:** Collect:  Prepaid:   
 Customer check acceptable:

**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).**

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
 \_\_\_\_\_  
**Shipper Signature**

**SHIPPER SIGNATURE / DATE**  
 This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

**Trailer Loaded:**  
 By Shipper  
 By Driver  
**Freight Counted:**  
 By Shipper  
 By Driver/pallets said to contain  
 By Driver/Pieces

**CARRIER SIGNATURE / PICKUP DATE**  
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.