

II. The Standard Bill of Lading Form

GS1 US (VICS) Standard BOL: <http://www.gs1us.org/>, then click Logistics for complete BOL guideline information

Date:		BILL OF LADING				Page		
SHIP FROM				Bill of Lading Number:				
Name: Address: City/State/Zip: SID#: FOB: <input type="checkbox"/>								
SHIP TO				CARRIER NAME: Trailer number: Seal number(s):				
Name: Location #: Address: City/State/Zip: CID#: FOB: <input type="checkbox"/>								
THIRD PARTY FREIGHT CHARGES BILL TO:				SCAC: Pro number:				
Name: Address: City/State/Zip:								
SPECIAL INSTRUCTIONS:				Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i> Prepaid _____ Collect _____ 3 rd Party _____				
				<input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading				
CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO		
				Y	N			
				Y	N			
				Y	N			
				Y	N			
GRAND TOTALS								
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
GRAND TOTAL								
<p>Note (1) Where the rate and carrier's liability for loss or damage may be dependent on value, shippers must 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 _____."</p> <p>Note (2) Liability limitation for loss or damage on this shipment shall be applicable as provided by contract or in the current NMFC or the carrier's governing tariff. Carrier's maximum standard liability is limited to \$10 per pound for NEW articles and \$5.00 per pound for USED or RECONDITIONED articles. In no event shall carrier's liability exceed \$100,000 per occurrence for NEW articles or \$5,000 per occurrence for USED or RECONDITIONED articles. Shipper may select excess liability coverage: see Item 780 of YRCF Tariff 100 for availability, coverage limits, and applicable rates and charges. Not selecting an additional excess liability coverage option is considered a waiver of same and standard liability will apply.</p>								
Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>								
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 written contracts that have been agreed on in writing between the carrier and shipper, if applicable, otherwise to rates, classifications, and rules, contained in YRCF Tariff 100 or the back hereof, that have been established by the carrier and are available to the shipper on request.				The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.				
Shipper Signature								
SHIPPER SIGNATURE / DATE		Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP 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.						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. Property described above is received in good order, except as noted.		

SUPPLEMENTAL BAR CODE AREA
RECEIVING STAMP AREA

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Date: _____

SUPPLEMENT TO THE BILL OF LADING

Page

Bill of Lading Number: _____

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
PAGE SUBTOTAL					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
						PAGE SUBTOTAL		

SUPPLEMENTAL BAR CODE AREA