



Shipping Instructions for Customers Requesting a Blind Shipment (Shipment Coordination)

1. It is up to you to instruct the shipping location to fill out a bill of lading per instructions below and give the bill of lading to our driver at time of pickup.
 - Shipper: Shipping location's name and address
 - Consignee: The name of the Shipper c/o YRC Freight at the origin terminal address. (**This is necessary** to prevent the shipment from moving from the origin terminal with incorrect shipper or consignee information.)
 - Freight charges must be Prepaid and paid by the Requestor.
2. Please e-mail or fax a coversheet with instructions, along with a completed bill of lading to your contact at Customer Service. This bill of lading should show the ultimate consignee name and address along with shipper name and address to be listed on delivery documents. Please include the payment terms for the shipment coordination fee (see note 3 below). This fee will be billed to the requestor if no specific billing instructions are given.

Contact Numbers:

Monday – Friday 0600-1930: Fax # 1 800 610 6554

Weekends and after hours - Call 1 800 610 6500 and ask a Customer Service Specialist for their e-mail address or fax number.

3. A **\$110.00** shipment coordination fee will be assessed on each blind shipment.

Note: If there are any additional accessorials, such as re-labeling, the paying party will be assessed those charges.

YRC Freight will make a diligent effort to execute your request, but will not be responsible if the request is not affected. Shipment Coordination is not available for Time Critical shipments.

If you have any questions regarding this procedure, please call a Customer Service Specialist at phone 1 800 610 6500 for more information.

Thank you for choosing YRC Freight for your transportation needs.



Visit us on the World Wide Web at www.my.yrcfreight.com

YRC FREIGHT BLIND SHIPMENT REQUEST FORM (SHCO)

Fax this form along with a completed Bill of Lading (BOL) as outlined in Shipping Instructions above. This information will be visible on all Shipment Documents.

<p>1. Where is the Pick-Up to be made (Shipped From)</p> <p>Name: _____</p> <p>Addr: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p>Contact Person: _____</p> <p>Phone: _____ ext _____</p> <p>Ready Time: _____ Close Time: _____</p>	<p>2. On shipment documents show Shipper as:</p> <p>Name: _____</p> <p>Addr: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p>
<p>3. Name & Address of Consignee where freight is to be delivered:</p> <p>Name: _____</p> <p>Addr: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p>	<p>4. Invoicee: 3rd Party must have an account in good standing with YRC Freight & <u>must be the party requesting the blind shipment.</u></p> <p>Name: _____</p> <p>Addr: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p>***PAY TERM IS ALWAYS <u>PPD</u>: PPD</p>
<p>5. Please provide us the following information about the commodities being shipped:</p> <p>Handling Units : _____ WT: _____ Class: _____ Description: _____</p> <p>Dimensions: Length: FT __ IN __ Width: FT __ IN __ Height: FT __ IN __</p> <p>Handling Units : _____ WT: _____ Class: _____ Description: _____</p> <p>Dimensions: Length: FT __ IN __ Width: FT __ IN __ Height: FT __ IN __</p> <p>Handling Units : _____ WT: _____ Class: _____ Description: _____</p> <p>Dimensions: Length: FT __ IN __ Width: FT __ IN __ Height: FT __ IN __</p> <p>If you are shipping <i>Hazardous Material</i> – Your Bill of Lading must be completed according to Government standards with proper description & 24 hour emergency response number.</p>	

6. Quote # if applicable: _____ Quote must be shown on Bill of Lading	7. Special Instructions:
8. Your Name & Phone #:	

Thank you for shipping with YRC Freight.