

<b>SHIP FROM</b>	Bill of Lading Number: _____  <div style="text-align: center; font-size: 2em; color: #ccc;">BAR CODE SPACE</div>
Company Name _____ Address _____ City, Zip/Postal Code _____ Telephone _____ Contact Name _____	
<b>SHIP TO</b>	Carrier Name: _____ Trailer number: _____ Serial number(s): _____
Company Name _____ Address _____ City, Zip/Postal Code _____ Telephone _____ Contact Name _____	
<b>CUSTOMS BROKER INFORMATION</b>	SCAC: _____ Pro Number: _____  <div style="text-align: center; font-size: 2em; color: #ccc;">BAR CODE SPACE</div>
Customs Broker _____ Telephone _____ Fax: _____ Account or Client # _____	
<b>Special Instructions:</b>	<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>  Service Freight Systems Inc. 2201 Brant Street, 2 <sup>nd</sup> Floor, #112 Burlington Ontario Canada L7P 3N8

CUSTOMER ORDER INFORMATION					
Customer Order No.	# of Packages	Weight	Pallet/Slip (check one)		Additional Shipper Information
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
<b>Grand Total</b>					

**CARRIER INFORMATION**

DECLARED VALUATION: \_\_\_\_\_

**Fee terms**

Maximum liability of \$4.41 per kilogram (\$2.00 per pound) unless declared valuation states otherwise.

Prepaid

<b>Shipper /Pickup Date</b> _____ Signature _____  Print Name _____ 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.	<b>Trailer Loaded:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver <b>Freight Counted:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	<b>Carrier Signature/Pickup Date</b> _____  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.	<b>Consignee / Delivery Date</b> _____ Signature _____  Print Name _____  Received in apparent good order except as noted the goods described herein
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