

Bill Of Lading

Date: 2024/08/15								
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA								
SHIP TO Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA								
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip:								
SPECIAL INSTRUCTIONS:								
SHIP FROM Bill Of Lading Number:MP24081316824065 49ODF25M BAR CODE SPACE 30844664781								
CARRIER NAME: CEVA LOGISTICS Trailer number:								
Seal number(s): SCAC: CEVA Pro number: BAR CODE SPACE								
Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid Collect YES 3 rd Party								
<input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading								
CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP		
49ODF25M	30844664781		1	1	9.15 pounds	Y N		
GRAND TOTAL			ADDITIONAL SHIPPER INFO					
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)(b) of NMFC Item 360)</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
		1	CARTONS	9.1500LB		Toe Plates Wheel Alignment Tool		
GRAND TOTAL							RECEIVING STAMP SPACE	
<small>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"</small>					COD Amount: \$ 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 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			
SHIPPER SIGNATURE/DATE This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.					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 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. <i>Property described above is received in good order,except as noted</i>			