

Bill Of Lading

Date: 2024/12/04									
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 160-2920 188th Street, Surrey, BC V3Z 0W5, CA SID#: _____ FOB: <input type="checkbox"/>	Bill Of Lading Number: MP24120423017676 6ZZ9I7IM,6TH6HEXJ,5S9975RX <p style="text-align: center;">BAR CODE SPACE 33228653651</p>								
SHIP TO Amazon YYZ4 8050 Heritage Road, Brampton, L6Y 0C9, CA CID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: Trailer number: _____ Seal number(s): SCAC: Pro number:								
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip:	<p style="text-align: center;">BAR CODE SPACE</p> 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			
6ZZ9I7IM, 6TH6HEXJ, 5S9975RX	33228653651		58	58	314.41 pounds	Y N			
GRAND TOTAL		ADDITIONAL SHIPPER INFO							
CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M.	COMMODITY DESCRIPTION	LTN ONLY		
QTY	TYPE	QTY	TYPE		(X)		NMFC#	CLASS	
		58	CARTONS	314.4100LB		Wheel chock tie down kit-Wheel chock style			
GRAND TOTAL							RECEIVING		
							STAMP SPACE		
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 _____"							COD Amount: \$ _____ Freight 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).							The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
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 _____		
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>			