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800-657-6936 www.valleycartage.com

VALC

VALLEY CARTAGE 3011 ENLOE STREET HUDSON, WI 54016 715-386-8836 800-657-6936 FAX: 715-386-8889

STRAIGHT BILL OF LADING SHORT FORM - Original - Not Negotiable

PLACE PRO LABEL HERE

DATE				IMPORTANT	T - PI	ease Use	e Zip	o Codes!			
				ned rates or contracts tha tablished by the carrier ar					er and shipper, if applicable	e, otherwise to the ra	ates,
SHIPPER'S ROUTE							SCAC	CUSTOMER P.O. NO.			
FROM: SHIPPER						I	TO: CONSIGNEE				
ATTN:						1	ATTN:				
STREET					\$	STREE	ΞΤ				
(ORIGIN) CITY, STATI					1 '	(DESTINATION) CITY, STATE, ZIP					
PHONE NO			FAX NO.		F	PHONE NO. FAX NO.					
6	חר					C.O.D. F	FEE 1	TO BE PAID BY	SHIPPER CON	NSIGNEE	
							CUSTOMER'S CHECK ACCEPTABLE FOR C.O.D.? YES NO Separation No No Separation No No No Separation No				
Handling Units No. & Type	Packages No. & Type	⇔ HM						mation including ERI provider organization, contract number and ERI			Class (For Info. Only)
HAZARDOUS EMERGENCY RESPONSE PHONE # CONTRACT #											
		▲ 1	OTAL						TOTAL►		
Subject to S								EDELOUE	CHARGES AR	E DDEDAIS	
If this shipment is to be delivered to the consignee without recourse to consignor, sign the following statement:						the consignor sha	hall		E PREPAIL OLLECT	,	
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. (Signature of						Consignor)	_	CHECK BOX IF COLLECT			
NOTE (1) Where the rate is dependent on value, shippers are required to state sp the agreed or declared value of the property as follows:						- ,	ing	CHE	LLECT		
"The agreed	value of		y is specifically stated by the	e shipper	to be not exceed	-		3RD PARTY BILLING INFO	RMATION		
NOTE (2) Liability Limitation for loss or damage on this shipment may be applica								Company Name: Street & P.O. Box:			
See 49 Ú.S.C. § 14706 (c)(1)(A) and (B). NOTE (3) Commodities requiring special or additional care or attention in handling or stow								City/State/Zip:			
NOTE (3) Commodities requiring special or additional care or attention in handling or stown be so marked and packaged as to ensure safe transportation with ordinary care. See Sec. 1 NMFC item 360.							f	Phone #:			
which said of to all the cor	carrier agrees	to carry	to destinat	ion, if on its route, or otherw	vise to de	liver to another ca	carrier or	n the rate to destination.	nown) marked, consigned, a Every service to be performed, which are hereby agreed to	ed hereunder shall be	subject
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to be shipper and accepted for himself and his assigns. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in properly classified, described, packaged, marked and labeled, and are in properly classified, described, packaged, marked and labeled, and are in properly classified.											
SHIPPER:						DRIVER:		DATE: TRAILER:			

PER (signature required): _

NUMBER OF HANDLING UNITS: