Date:
Page:

BILL OF LADING

MFS Freight Service, LLC

SHIP FROM

Name:
Address:
City/State/Zip:
Telephone:
Email

SHIP TO

Name:
Address:
City/State/Zip:
Phone:
Email

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:
Telephone:

SPECIAL INSTRUCTIONS:

Bill of Lading Number:

Authorization#:

CARRIER NAME:
Trailer number:
Seal number(s):
Confirmation Number

SCAC:
CARRIER NAME:

Same Day Pick up and Delivery Rate:

Freight Charge Terms: ***(freight charges are prepaid unless marked otherwise)***

Prepaid _____ **Collect** __XXX_____ **3rd Party** _____

(check box) Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
		-					
		-					
GRAND TOTAL	-	-					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			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(e) of NMFC Item 360*	NMFC #	CLASS
						GRAND TOTAL		

RECEIVING STAMP SPACE

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value 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: $ _____

Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

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 U.S. DOT.

TRAILER LOADED:
By Shipper
By Driver

FREIGHT COUNTED:
By Shipper
By Driver/pallets said to contain
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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.