

**STRAIGHT BILL OF LADING
NOT NEGOTIABLE**

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DATE			
SHIPPER'S NUMBER	BILL OF LADING NUMBER	QUOTE NUMBER	P.O.#
SHIPPER (FROM)		CONSIGNEE (TO)	
STREET		STREET	
CITY/PROVINCE	POSTAL CODE	CITY/PROVINCE	POSTAL CODE
PHONE NUMBER		PHONE NUMBER	

Received at the point of origin on the date specified, from the consignor mentioned herein, the property described, in apparent good order, except as noted (contents and conditions of contents of package unknown) marked, consigned and destined as indicated below, which the carrier agrees to carry and deliver to the consignee at the said destination, if on its own authorized route or otherwise to cause to be carried by another carrier on the route to said destination, subject to the rates and classification in effect on the date of shipment. It is mutually agreed, as to each carrier as of all or any of the goods over all or any portion of the route to destination, and as to each party of any time interested in all or any of the goods, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, including conditions set aside by the standard bill of lading, in power at the date of issuing, which are hereby agreed by the consignor and accepted for himself and his assigns. The Contract for the carriage of the goods listed in the bill of lading is governed by regulation in force in the jurisdiction at the time and place of shipment and is subject to the conditions set out in such regulations.

DANGEROUS GOODS	PIECES	U.N.	PROPER SHIPPING NAME AND SPECIAL MARKS	DANGEROUS GOODS		WEIGHT <input type="checkbox"/> LBS. <input type="checkbox"/> KG	FREIGHT CHARGES		
				CLASS PRIMARY (SUBSIDIARY)	PKG. GRP.		<input type="checkbox"/> COLLECT	<input type="checkbox"/> PREPAID	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	
TOTAL 0		SEAL NUMBER(S)		PLACARDS		TOTAL WEIGHT 0		DECLARED VALUATION	
SPECIAL INSTRUCTIONS/DIMENSIONS				OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO		ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO		IF AT CONSIGNOR'S RISK, WRITE OR STAMP HERE C.O.D. SHIPMENTS AMOUNT \$ COLLECTION CHARGE <input type="checkbox"/> COLLECT <input type="checkbox"/> PREPAID Maximum liability \$2.00 per pound computed on the total weight of the shipment unless declared valuation states otherwise. Declared value greater than \$25/lb or \$50,000 must have a Rosenau Transport Quote # to be honoured valid.	
				TYPE OF PLACARD		QUANTITY			
				EMERGENCY RESPONSE PHONE NUMBER					
				EMERGENCY RESPONSE PLAN NUMBER					

NOTICE OF CLAIM

- (a) No carrier is liable for loss, damage or delay to any goods under the Bill of Lading unless notice thereof setting out particulars of the origin, destination and date of shipment of the goods and the estimated amount claimed in respect of such loss, damage or delay is given in writing to the originating carrier or the delivering carrier within sixty (60) days after the delivery of the goods, or, in the case of failure to make delivery, within nine (9) months from the date of the shipment.
- (b) The final statement of the claim must be filed within nine (9) months from the date of the shipment together with a copy of the paid freight bill.

DANGEROUS GOODS CERTIFICATION

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are properly classified and packaged, have dangerous goods safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the Transportation of Dangerous Goods Regulations.

NAME (Printed): _____

SHIPPER	CARRIER	CONSIGNEE
	PER	
PER	UNIT NO.	PER
	DATE	
	TIME	
	ARRIVAL TIME:	
	DEPARTURE TIME:	