

**STRAIGHT BILL OF LADING
NOT NEGOTIABLE**



APPLY PRO STICKER HERE

DATE		SHIPPER'S NUMBER		BILL OF LADING NUMBER		ROSENAU 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 condition 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 or: the route to said destination, subject to the rates and classifications 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 any or all 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	PROPER SHIPPING NAME AND SPECIAL MARKS	DANGEROUS GOODS			WEIGHT <input type="checkbox"/> LBS. <input type="checkbox"/> KG	FREIGHT CHARGES	
			CLASS PRIMARY (SUBSIDIARY)	U.N.	PKG. GRP.		<input type="checkbox"/> COLLECT	<input type="checkbox"/> PREPAID
							<input type="checkbox"/> COLLECT <input type="checkbox"/> PREPAID Freight Charges will be collect unless marked prepaid	
							C.O.D. SHIPMENTS	
							AMOUNT \$	COLLECTION CHARGE <input type="checkbox"/> COLLECT <input type="checkbox"/> PREPAID
								IF AT CONSIGNOR'S RISK, WRITE OR STAMP HERE
								DECLARED VALUATION
	TOTAL	SEAL NUMBER (S)	PLACARDS OFFERED TO CARRIER ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL WEIGHT	\$ _____	
SPECIAL INSTRUCTIONS / DIMENSIONS			TYPE OF PLACARD		QUANTITY	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 \$50,000.00 must have a Rosenau Quote # to be honoured valid.		
			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 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.

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