



**BILL OF LADING  
(NON-NEGOTIABLE)  
U.S. DOT No. 125563**

**ORDER NUMBER**

EST#

<b>C O N S I G N O R</b>	SHIPPER : _____	<b>C O N S I G N E</b>	SHIPPER : _____
	STREET ADDRESS : _____ APT. : _____		STREET ADDRESS _____ APT. : _____
	CITY, STATE, ZIP : _____		CITY, STATE, ZIP : _____
	ORIGIN PHONE : _____		DESTINATION PHONE : _____
	CONTACT : _____ PHONE : _____		CONTACT : _____ PHONE : _____
	COMPANY (Associated With) : _____		<b>FORM OF PAYMENT (per tariff) : CASHIERS CHECK</b>

**CHANGE in FORM of PAYMENT: (per tariff)**     Cash     Cert. Check     Traveler's Check     Bank Check     Credit Card    (Customer's Initials)

<b>B I L L T O</b>	<input checked="" type="checkbox"/> C.O.D. <input type="checkbox"/> NAT. ACCT. # : _____	<b>N O T I F Y</b>	NOTIFY IN CASE OF : <input type="checkbox"/> DELAY <input type="checkbox"/> CHARGES
	BILL TO : _____		NAME : _____
	STREET ADDRESS : _____		STREET ADDRESS : _____
	CITY, STATE, ZIP : _____		CITY, STATE, ZIP : _____
ATTN : _____ P.O. NO. : _____	PHONE : 000-000-0000    E-MAIL : _____		

AGREED PICK UP DATES			AGREED DELIVERY DATES			PACK DATE	BINDING DATE	VALID THRU	TARIFF	PRICE PROGRAM	SECTION	BOUND WEIGHT	ACTUAL WEIGHT
Early	Last	Preferred	Early	Last	Preferred	05/28/2009	05/13/2009		MT01	GPP1	3	7,560	
05/28/2009	05/28/2009	05/28/2009	06/02/2009	06/06/2009	06/02/2009								

<b>GUARANTEED PICK-UP and DELIVERY DATES - DAILY ALLOWANCE</b> (if applicable, per tariff, 3500 pound minimum): <b>\$125.00 Per Day</b>  <b>** VOLUME / WEIGHT CONVERSION = 7 LBS. PER CUBIC FOOT **</b>	SHIPPER REQUESTED REWEIGH <input type="checkbox"/> YES <input type="checkbox"/> NO  SHIPPER WAIVES RIGHT to OBSERVE REWEIGH <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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<b>V A L U A T I O N</b>	<p align="center"><b>CUSTOMER DECLARATION OF VALUE</b> THIS IS A TARIFF LEVEL OF CARRIER LIABILITY - IT IS NOT INSURANCE</p> <p><b>Unless you select the Alternative Level of Liability shown in the column to the right,</b> your shipment will be transported under your mover's <b>FULL VALUE PROTECTION</b> Level of Liability. If any article is lost, destroyed or damaged while in your mover's custody, your mover will, at its option, either 1) repair the article to the extent necessary to restore it to the same condition as when it was received by your mover, or pay you for the cost of such repairs; or 2) replace the article with an article of like kind and quality, or pay you for the cost of such a replacement. An additional charge applies for this level of liability; to avoid this additional charge, you <b>must</b> select the <b>Alternative Level of Liability</b> shown in the column to the right.</p> <p>Under the <b>FULL VALUE PROTECTION</b> Level of Liability your shipment will be transported based on a value of \$15,000 or \$6.00 per pound multiplied by the bound weight of the shipment, whichever is greater. If you wish to declare a higher value for your shipment, you <b>must</b> indicate that amount below: The value of my shipment is: _____</p> <p>You <b>must also select</b> one of the following deductible amounts under the <b>FULL VALUE PROTECTION</b> Level of Liability that will be applicable for your shipment:</p> <p>No Deductible (_____)    \$250 Deductible (_____)    \$500 Deductible (_____)    (initial)    (initial)    (initial)</p> <p>\$750 Deductible (_____)    \$1,000 Deductible (_____)    (initial)    (initial)</p>	<p align="center"><b>ALTERNATIVE LEVEL of LIABILITY - Released Value of 60 Cents Per Pound Per Article</b> (Waiver of FULL VALUE PROTECTION)</p> <p>If any article is lost, destroyed or damaged while in your mover's custody, your mover's liability is limited to the actual weight of the lost, destroyed or damaged article multiplied by 60 cents per pound per article. This is the basic liability level and is provided at no charge. <u>It is considerably less than the average value of household goods.</u> If you do <b>not</b> select this Alternative Level of Liability, your shipment will be transported at the <b>FULL VALUE PROTECTION</b> Level of Liability and you will be charged the applicable valuation charge.</p> <p>To <b>wave</b> the <b>FULL VALUE PROTECTION</b> Level of Liability and to <b>select the Alternative Level of Liability</b>, you <b>must</b> write, on the line below, the words <b>"60 cents per pound"</b>.</p> <p>I release my shipment at: _____</p> <p align="center"><b>Your signature is REQUIRED here: I acknowledge that for my shipment I have either waived the FULL VALUE PROTECTION Level of Liability OR declared a value under the FULL VALUE PROTECTION Level of Liability and selected a deductible amount, if appropriate.</b></p> <p>X _____ (DATE) CUSTOMER'S SIGNATURE AT ORIGIN    (DATE)</p>
	<p align="center"><b>EXTRAORDINARY (UNUSUAL) VALUE ARTICLE DECLARATION:</b></p> <p>I acknowledge that I have prepared and retained a copy of the "Inventory of Items Valued in Excess of \$100 Per Pound Per Article" that are included in my shipment and that I have given a copy of this inventory to the mover's representative. I also acknowledge that the mover's liability for loss of or damage to any article valued in excess of \$100 per pound will be limited to \$100 per pound for each pound of such lost or damaged article (based on actual article's weight), not to exceed the declared value of the entire shipment, unless I have specifically identified such article for which a claim for loss or damage is made on the attached inventory.    X _____</p>	
	<p align="center"><b>ON POINT PRICE CERTAINTY TOTAL</b> \$ _____ (Unless an Addendum or a New Estimate / Order for Service is Executed)</p>	
	<p>Your "On Point Price Certainty Total" amount <b>includes</b> the following Bound items:</p> <ol style="list-style-type: none"> <li>1. Transportation Services which include loading service, transportation FROM the City/State/Zip listed above TO the City/State/Zip listed above, and unloading service;</li> <li>2. Valuation declared above;</li> <li>3. Cartons, Packing and/or Unpacking Services listed as included;</li> <li>4. Other Additional Services listed as included;</li> </ol> <p><b>PLUS</b> any Non-Bound charges shown for Storage-In-Transit (SIT), 3rd Party Charges and Advance Charges.</p> <p><b>WEIGHT ALLOWANCE:</b> If the shipment's Actual Weight is LESS than the Bound Weight, an allowance equal to \$ _____ per hundredweight (cwt) will be paid to Customer based on the Difference <u>between</u> the Bound Weight and either the shipment's Actual Weight or 2100 pounds (minimum weight), whichever is greater.</p>	

Customer acknowledges receipt of and accepts this Bill of Lading, including all terms written and printed, stamped or typed on all pages (front and/or back) of this form.  X _____ (DATE) (CUSTOMER'S SIGNATURE AT ORIGIN)	<p align="center"><b>PAYMENT ACKNOWLEDGEMENT</b></p> <p>\$ _____ BY _____          Payment Received _____ (Date)</p> <p>\$ _____ BY _____          Payment Received _____ (Date)</p> <p align="center"><b>STORAGE ACKNOWLEDGEMENT</b></p> <p>Received for Storage: _____ (Destination Warehouse)</p> <p>BY _____ (Date)    Control Number _____          Warehouseman's Signature</p>
<p align="center"><b>DELIVERY ACKNOWLEDGEMENT</b></p> <p>Shipment was received in apparent good condition except as noted on inventory and services ordered were performed.</p> <p>X _____ (Date)          Received by Customer's Signature</p> <p>X _____ (Date)    Driver Code _____          Delivered by Van Operator's Signature</p>	