


# Bandstra Transportation Systems Ltd.

## Bill of Lading

PLEASE PRINT CLEARLY ON BILL OF LADING.



**STRAIGHT BILL OF LADING  
-NOT NEGOTIABLE-**

HEAD OFFICE  
E. Yellowhead Hwy, P.O. Box 95  
Smithers, BC, Canada V0J 2N0  
Toll-free: 800-571-2057  
Fax: 250-847-5042

AFFIX LABEL HERE

Visit us at [www.bandstra.com](http://www.bandstra.com)

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| Date <b>Jul 1, 2010</b> mm / dd / yyyy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Shippers # <b>2250001</b>                                                                                                                                                       |                                                                                                                                                                                                          | Purchase Order # <b>123-456789</b>                                                                                                                                                                                                                             |  | Quote # <b>Q897 (or) \$326.81 as per Joe</b>                                   |  |
| Shipper<br><b>ACME Manufacturing Inc</b><br>Street <b>1423 Main Street</b><br>City <b>Smithers</b> Province <b>BC</b> Postal Code <b>V0J 5J7</b><br>Phone <b>(250) 555-1234</b> Contact <b>Lynda Allen</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                 | Consignee<br><b>Axis Chemical Company</b><br>Street <b>4555 122nd Ave</b><br>City <b>Calgary</b> Province <b>AB</b> Postal Code <b>T1X 2H3</b><br>Phone <b>(780) 555-7689</b> Contact <b>Eric Walter</b> |                                                                                                                                                                                                                                                                |  |                                                                                |  |
| Bill to name <b>Smith and Co.</b> Street <b>3217 Duke St</b> City <b>Montreal</b> Province <b>PQ</b> Postal Code <b>H3C 5K4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                 | Routing / Interliner <b>ABC Trucking - Vancouver</b>                                                                                                                                                     |                                                                                                                                                                                                                                                                |  |                                                                                |  |
| No. of Pieces <b>40</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Description of Articles and Special Marks <b>Cases detonator assemblies (on 1 skid)</b>                                                                                         |                                                                                                                                                                                                          | Weight (LBS) Subject to Correction <b>646</b>                                                                                                                                                                                                                  |  | Dangerous Goods (TDG)<br>Class <b>1.4B</b> U.N. # <b>0361</b> Pkg Grp <b>2</b> |  |
| Dimensions<br>L <b>36"</b> x W <b>48"</b> x H <b>39"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Total Cubic Feet <b>39</b>                                                                                                                                                      |                                                                                                                                                                                                          | Freight Charges<br>Shipper To Check<br><input type="checkbox"/> Prepaid<br><input type="checkbox"/> Collect<br><input checked="" type="checkbox"/> Third Party<br><small>if not indicated shipment will automatically move collect.</small>                    |  |                                                                                |  |
| Special Instructions<br><b>Call consignee to arrange delivery time.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Controlled Temperature Service Required<br><input type="checkbox"/> Refrigerated <input type="checkbox"/> Heated <input type="checkbox"/> Frozen                                |                                                                                                                                                                                                          | C.O.D. Amount<br>\$ _____<br>C.O.D. Fee<br><input type="checkbox"/> Prepaid <input type="checkbox"/> Collect                                                                                                                                                   |  |                                                                                |  |
| Dangerous Goods (TDG)<br>Dangerous Goods Paperwork Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Total TDG Weight (kg) <b>294</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Declared Valuation (available at additional cost)<br>Declared Valuation \$ <b>4102.00</b>                                                                                       |                                                                                                                                                                                                          | Advance Charges<br>Please Protect<br>\$ _____                                                                                                                                                                                                                  |  |                                                                                |  |
| Emergency Response Phone # <b>800-555-4321</b> Type of Placard <b>1.4B</b> No. of Placards <b>4</b> Emergency Response Plan # <b>ERP 02-1510</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Maximum liability of carrier is \$2.00 per lb. unless declared valuation states otherwise. An excess valuation charge will be assessed on valuation in excess of \$2.00 per lb. |                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                |  |                                                                                |  |
| <small>THE CONTRACT FOR THE CARRIAGE OF THE GOODS LISTED IN THIS BILL OF LADING IS COVERED BY REGULATIONS IN FORCE IN THE JURISDICTION AT THE TIME AND PLACE OF SHIPMENT AND IS SUBJECT TO THE CONDITIONS SET OUT IN SUCH REGULATIONS. SEE FULL CONDITIONS AT: <a href="http://www.bandstra.com/conditions.pdf">http://www.bandstra.com/conditions.pdf</a><br/>                 Renewed at the point shown on the date specified and from the shipper mentioned herein, the property mentioned herein described in agreed good order, except as noted contents and conditions of contents of packages unknown, unmarked, consigned and destined as indicated below, which said carrier agrees to carry and deliver to the said consignee at the said destination if on its own route, otherwise to deliver to another carrier on the route to said destination, subject to the classification and tariffs in effect on the date of the shipment. It is mutually agreed as to each carrier of all or any said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, which are herein agreed to by the shipper and accepted for himself and his assigns.<br/>                 NOTICE OF CLAIM - Article 12: (a) The carrier is not liable for loss, damage or delay to any of the goods transported under this bill of lading unless notice of the loss, damage or delay, 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 60 days after the delivery of the goods, or, in the case of failure to make delivery, within 9 months after the date of shipment of the goods. (b) The final statement of the claim must be filed within 9 months after the date of shipment, together with a copy of the paid freight bill. <b>GST / HST # R100389056</b></small> |  |                                                                                                                                                                                 |                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                |  |                                                                                |  |
| Shipper to Complete this Section<br>Shipper <b>ACME Manufacturing</b><br>Per (Signature) <b>X L. Allen</b><br>Print Name <b>Lynda Allen</b><br>Date <b>Jul 1, 2010</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Consignee to Complete this Section (if delivered on BOL)<br>Consignee<br>Receiver Signature <b>X</b><br>Print Name<br>Date                                                      |                                                                                                                                                                                                          | Driver to Complete this Section<br>Driver Name (Please print) <b>Hans Veenstra</b><br>Carrier <b>Bandstra Transportation Systems Ltd.</b> Unit # <b>254</b><br>Date <b>Jul 1, 2010</b> Piece Count <b>40</b><br>Time In <b>9:35 AM</b> Time Out <b>9:40 AM</b> |  |                                                                                |  |

**BARCODE LABEL:**  
Affix Bandstra bill of lading barcode label here. The labels can be picked up at any Bandstra depot or with any driver.

With no unique Bandstra reference numbers on the bill of lading, a barcode bill of lading barcode label **MUST** appear on the freight and every sheet of the BOL.

**QUOTE #:**  
If you have been quoted a special rate for this shipment, indicate the assigned quote number or rate here.

**THIRD PARTY BILLING:**  
Is someone other than the shipper or consignee paying the freight charges? Fill out these boxes to indicate the location for the invoices to be sent to.

**FREIGHT CHARGES:**  
Shipper to check, if not completed the shipment will automatically move collect.

**COD:**  
Does Bandstra need to collect "Cash on Delivery" for the shipper? If so, who is paying for the surcharge for this service.

**ADVANCE CHARGES:**  
Protected interline charges for Bandstra to collect on behalf of another carrier.

**DECLARED VALUATION:**  
Transit protection can be purchased at additional cost. If no valuation is declared, maximum liability of carrier is \$2.00 per lb.

**CONDITIONS:**  
Full conditions can be found at: [www.bandstra.com](http://www.bandstra.com)

**HEAD OFFICE: 1-800-571-2057**

Visit us online at: [www.bandstra.com](http://www.bandstra.com)

Accurate and complete information on the Bill of Lading ensures that there are no misunderstandings. These efficiencies save you and your customers time and money. Help us provide you with an accurate freight invoice combined with claims free, on-time service. It all starts with this document.