

# Procedure for Completing the Bill of Lading



\* The Bill of Lading begins on Page 2 of this document

All the required fields on the Bill of Lading are editable and can be completed using your computer keyboard. Start by clicking on the date field then use the TAB key to move to the subsequent field. To simplify printing, the 2<sup>nd</sup> and 3<sup>rd</sup> pages of the BOL will duplicate whatever is entered into the 1<sup>st</sup> page. The 1<sup>st</sup> page is stamped with "ORIGINAL COPY", the 2<sup>nd</sup> with "CARRIER COPY", and the 3<sup>rd</sup> with "SHIPPER COPY". Don't forget to sign the BOL at the bottom.

## Write clearly or type the following on the Bill of Lading:

- The date the freight is scheduled for pick up.
- The Shipper's, the Consignee's and the Third Party's (if applicable) Company name, street address, city, state, zip code and phone number in their respective fields.
- The total number of packages Gold Coast Freightways will receive.
- A complete description of articles Gold Coast Freightways will receive. Descriptions such as "FAK", "General Merchandise", "Assorted Goods" etc, are not acceptable. An improper description may result in improper classification of freight.
- The class of the merchandise, if known.
- The weight of the merchandise.
- Please indicate the number of pallets for the shipment.
  
- The mode of payment. The options for mode of payment are:
  1. Prepaid (freight paid by Shipper)
  2. Collect (freight paid by Consignee)
  3. Third Party (freight paid by a Third Party)

## For C.O.D. shipments

- (Gold Coast Freightways receiving payments for remittance to Shipper or Third Party):
  - The abbreviation "C.O.D." must appear in front of the Consignee's name.
  - The C.O.D. amount must be written or typed clearly in the C.O.D. space provided on the Bill of Lading.
  - The C.O.D. fee mode of payment must be indicated. Options for mode of payment are:
    - Prepaid (C.O.D. fee to be paid by Shipper or Third Party)
    - Collect (C.O.D. fee to be paid by Consignee)
  
- The type of payment must be indicated on the Bill of Lading. Clearly write, type or mark the box indicating the type of payment. Options for type of payment are:
  1. Company Check
  2. Certified or Cashier's Check
  3. Money Order
  4. Cash (Gold Coast Freightways will not accept cash payments over \$250.00)
  
- Please indicate on the Bill of Lading if a postdated check is acceptable.
- Write or type the name, street address, city, state, zip code and phone number of the party Gold Coast Freightways will remit the C.O.D. to.

## When a Gold Coast Freightways' driver arrives to receive your freight:

- A Pro Number or Tracking number must be affixed to the Shipper's copy of the Bill of Lading, Gold Coast Freightways' copy of the Bill of Lading, and the freight.
- A representative of the Shipper must sign the Bill of Lading.
- The driver picking up the freight must sign the Bill of Lading with a verified piece count and date freight was picked up.



# BILL OF LADING

South Florida / Main Office (305) 687-3560 (877) 465-3585  
 New York/New Jersey (201) 653-0056 (800) 524-2627  
 Illinois/St Louis (312) 433-2230 (800) 544-9666  
 Central Florida (941) 686-6176 (800) 237-1116  
 South Jersey/Eastern Penn. (609) 224-9220 (800) 579-6624  
 North Florida/Jacksonville (904) 404-8160 (855) 202-8782

PRO NUMBER HERE

Date:

SHIPPER'S NO.

PURCHASE ORDER NO.

SHIPPER \_\_\_\_\_ CONSIGNEE \_\_\_\_\_ **"COD" must appear before consignee's name on Collect on Delivery Shipments.**

STREET ADDRESS \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP (required) \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP (required) \_\_\_\_\_

FREIGHT CHARGES (Third Party Bill To) NAME _____ STREET _____ CITY/ST/ZIP _____	<b>Special Instructions:</b>   	<b>Freight Charges to paid by:</b> <input type="checkbox"/> SHIPPER (PREPAID) <input type="checkbox"/> CONSIGNEE (COLLECT) <input type="checkbox"/> THIRD PARTY (PREPAID)
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NUMBER OF PACKAGES	HAZARDOUS MATERIALS	KIND OF PACKAGES, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS (SUBJECT TO CORRECTION)	WEIGHT (SUBJECT TO CORR)	CLASS OR RATE

On Collect on Delivery Shipments, the letters "COD" must appear before consignee's name.

C.O.D.

Collect on Delivery

\$ \_\_\_\_\_

**C.O.D. AMOUNT**  
 Cash or Certified Check  
 Consignee Check Acceptable

C.O.D. FEE TO BE PAID BY:  SHIPPER  COSIGNEE

NOTE (2) Liability Limitation for loss or damage on this shipment may be applicable unless a shipper specifies a declared value and pays an ad valorem charge. Therefore, all shipments are deemed to be released for liability purposes in accordance with the maximum value provisions of items 161 and 781 of Tariff GLDF-300.

Note: When the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. **The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:**

\$ _____	Per lb.			
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(Signature of Consignor)

**FOR FREIGHT COLLECT SHIPMENTS:**  
 If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
**This carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.**

**REMIT C.O.D. CHECK/CASH TO:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and the shipper, if applicable, otherwise to the rates, classifications and the rules that have been established by the carrier and are available to the shipper, on request, the property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown above which said carrier agrees to carry to destination, if on its route or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, which are hereby agreed to by the shipper and accepted for himself and his assigns.

**Mark with an "X" to designate Hazardous Materials as defined by DOT regulations.**

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in the proper condition for transporting according to the applicable regulations of the Department of Transportation.

SHIPPER: _____	CARRIER: <b>GOLD COAST FREIGHTWAYS, INC.</b>	TOTAL NO. OF PIECES: _____
PER: _____ (Signature Required)	DRIVER: _____	DATE RECEIVED: _____

All Shipments Subject to Gold Coast Freightways, Inc. Rules and Tariffs (available upon request) and the provisions of the Uniform Bill of Lading and the N.M.F.C.



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NAME		
STREET		

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**C.O.D.**

**Collect on Delivery**

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\$	Per lb.	(Signature of Consignor)	REMIT C.O.D. CHECK/CASH TO:

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