## INSTRUCTIONS FOR COMPLETING CARLILE TRANSPORTATION'S HAZARDOUS MATERIALS SHIPPING DOCUMENT

**A SHIPPER** - Clearly print or type the shipper's name, address, phone number, and company name (if applicable)

**B CONSIGNEE** - Clearly print or type the consignee's name, address, phone number, and company name (if applicable).

**C 24-HOUR EMERGENCY CONTACT** – Hazmat shipping paperwork must contain an emergency response telephone number that is monitored at all times, and does not require a call back (i.e., an answering service, answering machine, etc.). Please provide the area code or international access code, contact's name or Contract No., for use in the event of an emergency involving the hazardous material, see 49CFR172.600

**D ERG #** (Emergency Response Guidebook Number) – provide the three digit number associated with your hazardous material (found in the Emergency Response Guidebook). This will ensure that in the event of an emergency, the response teams (e.g. fire department, EMS, LEO) can identify the substance from a safer distance and combat with correct extinguishers and clean up measures.

**E NUMBER** - Enter the number of packages being shipped. See 49CFR172.202 (a) (7)

**F TYPE OF PACKAGES** – Indicate the packaging type (box, cylinder, drum, etc)

**G HAZMAT** - If shipment contains Hazmat, indicate with an "X" (or RQ - Reportable Quantity if applicable)

**H KEEP FROM FREEZING** – If the shipment must be kept from freezing, please check the KFF box

**I PROPER SHIPPING NAME** - Enter the proper shipping name in the correct I.S.H.P or "I ship" order: Identification number, Shipping name, Hazard class, Packing group (if applicable) – example: UN1993, Flammable liquid N.O.S. (acetone), 3, PG III (See 49CFR172.101)

**J GROSS WEIGHT** - Enter the gross weight of the cargo, which must include an indication of the applicable unit of measurement (e.g. 200 kgs or 50 lbs), see 49CFR172.202 (a)(5)

**K DIMENSIONS** – Provide the length, width, and height of the shipment

**L SIGNATURE AND DATE** – Hazmat shipping paperwork must be legibly signed and dated by the shipper or his agent and may be legibly signed manually, verbally (over the phone), or by electronic means, see 49CFR172.204 (d)


**Anchorage:** (907) 276-7797
**Tacoma:** (253) 874-2633
**Fairbanks:** (907) 451-7155
**Kodiak:** (907) 343-3290
**Kenai:** (907) 283-2884
**Prudhoe Bay:** (907) 659-2398
**Houston:** (281) 227-0627
**Edmonton:** (780) 466-7179
**Minnesota:** (651) 982-9907


# HAZARDOUS MATERIALS SHIPPING DOCUMENT

DATE SHIPPED

| 1. SHIPPER (A) | 2. CONSIGNEE (B) |
|---|---|
| Company Name | Company Name |
| Phone Number | Consignee Name |
| Email Address | Phone Number |
| Address | Address |
| City, State, Zip | City, State, Zip |
| **3. BILL TO** | **4. ULTIMATE CONSIGNEE** |
| Company Name | Company Name |
| Shipper Name | Consignee Name |
| Phone Number | Phone Number |
| Address | Address |
| City, State, Zip | City, State, Zip |

| PAYMENT TERMS | PREPAID (SHIPPER) | COLLECT (CONSIGNEE) | 3RD PARTY (BILL TO) | HAZARDOUS MATERIALS EMERGENCY CONTACT NUMBER (C) | ERG # (D) |
|---|---|---|---|---|---|

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as shown below, which said carrier agrees to carry to destination, if on its routes, 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, **including the conditions on back hereof**, which are hereby agreed to by the shipper and accepted for himself and his assigns.

## 5 DESCRIPTION OF ARTICLES, SPECIAL MARKS, AND EXCEPTIONS

| Number of Packages | Type of Packages (bx, cyl, crate, tube, drum, trailer, etc.) | HM X or RQ | KFF | Commodity Description ID Number, Proper Shipping Name, Hazard Class, Packing Group | Weight (lbs) subject to correction | Dimensions (K) Length | Width | Height |
|---|---|---|---|---|---|---|---|---|
| (E) | (F) | (G) | (H) | (I) | (J) | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

## 6 ADDITIONAL SERVICES (ADDITIONAL FEES MAY APPLY)

| | | |
|---|---|---|
| Keep From Freezing | Tarping Required | Uncrating |
| Chill/Freeze Temp (circle one) | Lift Gate | Removal of Debris |
| Limited Access Pickup/Delivery | Residential Pickup/Delivery | Second Pickup/Delivery or Pickup/Delivery Attempt |
| Inside Pickup/Delivery | Sorting and Segregating | Other Services Provided _____ |

## 7 LIMITS OF LIABILITY FOR CARGO LOSS OR DAMAGE

Where no value is declared below, the maximum liability on the shipment will be $20.00 per pound up to a maximum of $200,000 per shipment for new goods. Household goods, Used goods, and Package Express will have a maximum liability of $0.10 per pound up to a maximum of $5,000 per shipment. See the terms and conditions on the back of this Bill of Lading for additional information. The agreed or declared value of the property is specifically stated by the shipper to be not exceeding $_____ per_____

**NOTE:** For information on heavy Haul shipments, Declared Value shipments, limits of liability and claims see the back of this Bill of Lading.
**NOTE: Liability Limitations for loss or damage in this shipment may be applicable. See 49 U.S.C. SS14706 (c)(1)(A) and (B).**

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to the terms and conditions set forth on the reverse side hereon as well as to all applicable state and federal regulations.

## 8 SHIPPERS CERTIFICATION

X (L) _____ Shippers Signature  _____ Total Pcs. Shipped  (L) _____ Date

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

**FOR CARLILE USE ONLY**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Carlile P/U By | Date | Time AM PM | Total pcs | Carlile Del By | Date | Time AM PM | Trailer num. |
| Carlile Del By | Date | Time AM PM | Total pcs | Carlile Del By | Date | Time AM PM | Trailer num. |

X _____ Consignee Signature  _____ Total Pcs. Rec'd  _____ Print Last Name  _____ Date  _____ Time

Received the above specified property in apparent good order

KELLER-BOL