

LANDMARK TRANSFER LTD.

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BILL OF LADING • ORIGINAL • NOT NEGOTIABLE

(Issued in accordance with the Regulations made under the Truck Transportation Act)

CARRIER'S REF. NO.	VEHICLE NO.	SHIPPER'S REF. NO.
POINT OF ORIGIN		DATE
SHIPPER		ADDRESS

Received at the point of origin on the date specified, from the consignor mentioned herein, the property herein described, in apparent good order, except as noted (contents and conditions of contents of package unknown) marked, consigned and destined as indicated below, which the carrier agrees to carry and to deliver to the consignee at the said destination, if on its own authorized route or otherwise to cause to be carried by another carrier on the route to said destination, subject to the rates and classification in effect on the date of shipment.

It is mutually agreed, as to each carrier 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 all or any of the goods, that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, including conditions on back hereof, which are hereby agreed by the consignor and accepted for himself and his assigns.

CONSIGNEE	DESTINATION	PROV. /STATE
ADDRESS	ROUTE	

NO. OF PIECES OR QUANTITY	DESCRIPTION OF GOODS AND SPECIAL MARKS	WEIGHT <input type="checkbox"/> LBS. <input type="checkbox"/> KILOS	FREIGHT CHARGES
			COLLECT <input type="checkbox"/> PREPAID <input type="checkbox"/>
			FREIGHT CHARGES WILL BE COLLECT UNLESS MARKED PREPAID

REGULATED DANGEROUS GOODS

QUANTITY	UN NUMBER	SHIPPING NAME	PRIMARY CLASS	SUBSIDIARY CLASS	PACKING GROUP	WEIGHT <input type="checkbox"/> KILOS	BASIC \$ _____
							INBOUND / BEYOND \$ _____
							ACC. CHARGES \$ _____
							FUEL SUR-CHARGE \$ _____

SHIPMENT DIMENSIONS _____ X _____ X _____ INCHES / FEET CM / METRE	LIFTGATE <input type="checkbox"/>	HEATED SERVICE <input type="checkbox"/>	OTHER \$ _____ SUB-TOTAL \$ _____ GST \$ _____ TOTAL \$ _____
24 HOUR EMERGENCY NUMBER CANUTEC 613-996-6666	DANGEROUS GOODS DECLARATION I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are properly classified and packaged, have dangerous goods safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the Transportation of Dangerous Goods Regulations.		C.O.D. SHIPMENT Amount \$ _____
ERAP PLAN & PHONE NUMBER _____			
PLACARDS NUMBER TYPE	PRINT NAME X _____		

NOTICE OF CLAIM

a) No carrier is liable for loss, damage or delay to any goods carried under the Bill of Lading unless notice thereof 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 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 shipment.
 b) The final statement of the claim must be filed within nine (9) months from the date of shipment together with a copy of the paid freight bill.

DECLARED VALUATION \$ _____ MAXIMUM LIABILITY SHALL NOT EXCEED \$4.41 PER KILOGRAM COMPUTED ON THE TOTAL WEIGHT OF THE SHIPMENT UNLESS DECLARED VALUATION STATES OTHERWISE (CONDITIONS 9 & 10 ON BACK).

SHIPPER _____	CARRIER _____	CONSIGNEE _____
DATE _____	DATE _____	DATE _____
PER _____	PER _____	PER _____

NOTE CAREFULLY CONDITIONS ON BACK HEREOF WHICH ARE HEREBY ACCEPTED.