

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

Name of Carrier:
Frontier Transportation Services Inc.
 4690 Maple Grove Road
 Beamsville, Ontario, Canada, L0R 1B1
 Ph 1-888-483-7373 or 1-905-562-7272 Fax 1-905-562-7279

Date: _____
 Carrier's No. _____
 Shipper's No. **Nº** _____
 Vehicle No. _____

Received, subject to the classifications and tariffs in effect on the date of this Bill of Lading: the property described below, in apparent good order, except as noted (contents and condition of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own road or its own water line, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of 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 is to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, (as specified in Appendix B of Part 1035) which are hereby agreed to by the shipper and accepted for himself and his assigns:

SHIPPER:		TO CONSIGNEE:			
STREET		STREET			
ORIGIN	ZIP/PO.CODE	DESTINATION	ZIP/PO. CODE		
TELEPHONE		TELEPHONE			
DELIVERING CARRIER	ROUTE	LOAD TO BE:	<input type="checkbox"/> TARPED	<input type="checkbox"/> UNTARPED	
Number of packages	KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT (SUBJECT TO CORRECTION)	CLASS OR RATE	<input checked="" type="checkbox"/>	CHARGES (FOR CARRIER USE ONLY)

LOADING TIME	ARRIVE	UNLOADING TIME	ARRIVE
	START		START
	FINISH		FINISH

REMIT C.O.D. TO	C.O.D. AMT \$	PREPAID <input type="checkbox"/>
		COLLECT <input type="checkbox"/>

FREIGHT CHARGES PAID BY:	FREIGHT CHARGES ARE PREPAID UNLESS MARKED COLLECT	<input type="checkbox"/> CHECK BOX IF COLLECT
<input type="checkbox"/> SHIPPER <input type="checkbox"/> CONSIGNEE <input type="checkbox"/> 3RD PARTY		

FOR MOTOR CARRIER SERVICE	DECLARED VALUATION Maximum liability of \$4.41 per Kg (\$2.00 per lb.) Calculated on the total weight of the shipment, unless declared valuation states otherwise \$
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- Any agreement covering transportation of the goods described herein with other than due dispatch, or for specific time must be endorsed on this bill of lading and signed by the parties hereto.
- When a shipment is at "owners risk" the words "AT OWNERS RISK" must be entered and initialed by both parties thereto.

NOTICE OF CLAIM

A) No carrier is liable for loss, damage or delay to any goods under the Bill of Lading unless notice thereof setting out particulars of the origin, destination and date of shipment of the goods and 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 together with a copy of the paid freight bill.

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.

SHIPPER:	CARRIER: FRONTIER TRANSPORTATION SERVICES INC.	CONSIGNEE: Received the property described above in good order except as noted:
PER:	PER	CONSIGNEE: _____
		PER