



CARRIER: NEW PENN MOTOR EXPRESS, INC.  
 CORPORATE OFFICE: PHONE (717) 274-2521  
 FAX (717) 274-5593  
 P.O. BOX 630, LEBANON, PA 17042-0630

STRAIGHT BILL OF LADING - NOT NEGOTIABLE  
 NPME EQUAL OPPORTUNITY EMPLOYER

N.P. SHIPPER CODE \_\_\_\_\_  
 DATE \_\_\_\_\_

<b>CONSIGNEE (TO)</b>		<b>SHIPPER (FROM)</b>		ROUTE
NAME		NAME		
STREET		STREET		
DESTINATION - CITY, STATE		ORIGIN - CITY, STATE		ZIP + 4
CONSIGNEE'S PHONE NO.		SHIPPER'S BILL OF LADING NO.		

**THIRD PARTY BILL TO:**

NAME \_\_\_\_\_  
 STREET \_\_\_\_\_  
 DESTINATION - CITY, STATE \_\_\_\_\_ ZIP + 4 \_\_\_\_\_

FREIGHT CHARGES ARE PREPAID  
 UNLESS MARKED COLLECT: CHECK BOX IF COLLECT

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. THE CARRIER MAY DECLINE TO MAKE DELIVERY OF THE SHIPMENT WITHOUT PAYMENT OF FREIGHT AND ALL OTHER LAWFUL CHARGES.

\_\_\_\_\_  
 SIGNATURE OF CONSIGNOR

NUMBER SHIPPING UNITS	* HM	KINDS OF PACKAGING, DESCRIPTION OF ARTICLES SPECIAL MARKS AND EXCEPTIONS (SUB. TO CORR.)	WEIGHT (lbs.) (SUB. TO CORR.)	NMFC CLASS (FOR INFO. ONLY)

**C.O.D.** AMOUNT \$ \_\_\_\_\_

**C.O.D. FEE:**  
 PREPAID   
 COLLECT

**C.O.D. PAYMENT**  
 COMPANY CHECK ACCEPTED   
 CASH OR CERTIFIED CHECK   
 IF NOT CHECKED PAYMENT WILL BE CASH OR CERTIFIED CHECK

REMIT C.O.D. CHECK TO: (NAME) \_\_\_\_\_  
 STREET \_\_\_\_\_  
 ORIGIN - CITY, STATE \_\_\_\_\_ ZIP + 4 \_\_\_\_\_

**Note (1)** - Where 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 \_\_\_\_\_  
**Note (2)** - Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(A) and (B).  
**Note (3)** - Carrier's liability shall be limited to a maximum of \$25.00 per pound per injured article, subject to released values as provided in NMFC 100 Series and NPME 100-A Series. To receive coverage in excess of the maximum liability, INSERT TOTAL DOLLAR AMOUNT BELOW: There will be a charge for excess liability coverage.

\$ \_\_\_\_\_ excess liability coverage requested.

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; the property described above, in apparent good order, except as noted (contents and condition of contents of package 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, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

Shippers Certification	Carriers Certification
This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent document in the vehicle.
Per _____ Date _____	Driver _____ Package Nos. _____ Date _____ /Trailer No. _____

**1** \* Mark with "X" to designate Hazardous Materials as defined in the Department of Transportation Regulations  
**SHIPPING ORDER**

PLACE PICK-UP LABEL HERE