



POLARIS TRANSPORT CARRIERS INC
7099 TORBRAM ROAD
MISSISSAUGA, ON L4T 1G7
Phone: 905 671-3100 Fax: 905 671-4600

BILL OF LADING

SHIPPER PLEASE NOTE



FREIGHT CHARGES ARE PREPAID ON THIS
BILL OF LADING UNLESS MARKED COLLECT

FREIGHT CHARGES:

PREPAID

COLLECT

DATE SHIPPED (DD/MM/YYYY)

24/03/2025

| | | |
|---|--|---------------------------------|
| SHIPPER (FROM) SOMERSET INDUSTRIES | CONSIGNEE (TO) TRULIFE | TRACKING NO. P2913667 |
| ADDRESS 68 HARRISON ST | ADDRESS 39 E DAVIS ST | ORIGINAL BILL OF LADING NO. |
| CITY, PROVINCE/STATE POSTAL/ZIP CODE GLOVERSVILLE, NY 12078 | CITY, PROVINCE/STATE POSTAL/ZIP CODE TRENTON, ON K8V 4K8 | CUSTOMER ORDER NO. |
| SHIPPER'S PHONE NO. 110 518-725-2777 Ext | CONSIGNEE'S PHONE NO. Ext | PURCHASE ORDER NO. |

BILL THIRD PARTY FREIGHT CHARGES TO

PITT OHIO

PLACE PRO-BILL HERE

DESCRIPTION

| NUMBER SHIPPING UNITS | HM* | KIND OF PACKAGING, DESCRIPTION OF ARTICLES, SPECIAL REMARKS AND EXCEPTION | NMFC NO. | CLASS | WEIGHT (LBS) <small>Subject to connections</small> |
|-----------------------------|-----|---|----------|-------|---|
| 1 PLT | | <p>FABRIC</p> <p>Dims: 068-040-059</p> <p>Bill of Lading :SI 13565202432419</p> <p>***** IMPORTANT *****</p> <p>PLEASE FAX CUSTOMS DOCUMENTS TO (905) 671-9428 OR EMAIL TO customs@polaristransport.com</p> <p>PLEASE ATTACH THIS BILL ALONG WITH (YOUR ORIGINAL) BILL OF LADING</p> | | | 786.00LB |

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 ALL APPLICABLE LAWS AND REGULATION.

SUBJECT TO TARIFF PTG 100 TERMS AND CONDITIONS AS LISTED ON THE POLARIS TRANSPORTATION GROUP

WEBSITE polaristransport.com or can be viewed digitally [here](#).

ALL PARTIES ATTENTION is drawn to ITEM 33 of TARIFF PTG 100. Carrier liability will be limited to CAD \$2.00 per pound (CAD \$4.41 per KG) to a maximum of CAD \$50,000 unless a valuation is declared pursuant to ITEM 33 of TARIFF PTG 100.

HAZARDOUS MATERIALS
EMERGENCY CONTACT NO.

SHIPPER SIGNATURE

X

POLARIS TRANSPORT CARRIERS INC.

X

CONSIGNEE'S SIGNATURE - RECEIVED IN GOOD ORDER

X

PRINT - CONSIGNEE NAME

X

DATE RECEIVED (DD/MM/YYYY)