INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

# CENTRAL TRANSPORT® Delivery Receipt

**PRO-NUMBER**
[redacted]

**SHIP DATE**
2021-11-17

**Consignee:**
GM WARRANTY PTS 18002
45 NORTHPOINTE DR
ORION, MI 48359

Terminal Location: PONTIAC - MI — Terminal#: 505

**Shipper:**
FAIREY CHEVROLET OLDS
2885 ST MATTHEWS RD
ORANGEBURG, SC 29118

Terminal Location: COLUMBIA - SC — Terminal#: 292

**Reference Number**
[redacted]

**FREIGHT TERMS:**

**Freight Charges Are Collect**

**P.O. Number**

**SCAC:** CTII

*Special Instructions:*

## CENTRAL TRANSPORT BILL OF LADING

DATE: — Page 1

Please call Central Transport to schedule a pickup 586-467-1900

**SHIP FROM**
Name: Fairey Chevrolet
Address: 2885 Saint Matthews Road
City/State/Zip: Orangeburg SC 29118

Bill of Lading Number:

**SHIP TO**
Name: GM WARRANTY PTS 18002
Address: 45 NORTHPOINTE DR
City/State/Zip: ORION, MI 48359

CARRIER NAME: *Central Transport*
Trailer number:
Seal number(s):
SCAC: *CTII*
Pro number: [redacted]

**THIRD PARTY FREIGHT CHARGES BILL TO:**
Name: NA
Address: NA
City/State/Zip: NA

Transaction #: [redacted]
Emergency response number: InfoTrac 1-800-535-5053 (Account [redacted])

Freight Charge Terms:
Prepaid ______ Collect __X__ 3rd Party

☐ (check box) Master Bill of Lading: with attached underlying Bills of Lading

**CARRIER INFORMATION**

| HANDLING UNIT QTY | HANDLING UNIT TYPE | PACKAGE QTY | PACKAGE TYPE | WEIGHT | H.M. (X) | COMMODITY DESCRIPTION (If not listed, please list the UN#, description, class, and ERG #) | LTL ONLY NMFC # | LTL ONLY CLASS |
|---|---|---|---|---|---|---|---|---|
| | | | | | | UN3268, Safety devices, 9, ERG #171 | NA | 70 |
| | | | | | | UN3480, Lithium ion batteries, 9, ERG #136 | | |
| | | | | | | UN2794, Batteries, wet, filled with acid,8,ERG #154 | | |
| | | | | | | UN3363, Dangerous goods in apparatus,9,ERG #171 | | |
| 1 | | | | 300 | | UN3528, Engine, internal combustion, flammable liquid powered, 3, ERG #128 | | |
| | | | | | | UN3164 Articles, pressurized pneumatic, 2, ERG #126 | | |
| | | | | LBS | | GRAND TOTAL | | |

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding ______ per ______

COD Amount: $ __NA__
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself/herself and his/her assigns. [redacted]

**SHIPPER SIGNATURE / DATE**
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.

Trailer Loaded:
☒ By Shipper
☐ By Driver

Freight Counted:
☐ By Shipper
☐ By Driver/pallets said to contain
☒ By Driver/Pieces

**CARRIER SIGNATURE / PICKUP DATE**
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT [redacted]

1 HU 1900166

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*Signed By:* Shannon w

[redacted]

*Signature:* ______________________
*(States shipment received in good order)*

*HU's Received:* 1 *Date:* 2021-11-22

*Driver:* CT-505209 *Trailer:* 1901317

*Arrive Time:* 6:59 AM *Depart Time:* 8:14 AM

**PRO-NUMBER:** [redacted]

☐ Inside Delivery ☐ Sort/Segregate ☐ Driver Delay
☐ Residential Delivery ☐ Liftgate ☐ Redelivery

***By signing below, Consignee acknowledges that additional delivery service/s were performed and are subject to rules and conditions outlined in the CT100 series rules tariff.***

*Customer Signature:* ______________________ *Date:* __________

| Date ________ | Number And Type of Container | Number And Type of PCS | Exception Type |
|---|---|---|---|
| Log # ________ | | | |
| Total Exceptions ________ | | | |

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction allowance may be made to this bill as permitted by 49 CFR 1051(2)(ii).