



Pride in Our People, Pride in Our Performance

Thank you for choosing R+L Carriers

TO COMPLETE A BILL OF LADING PLEASE START BY LOGGING ONTO OUR
WEBSITE AT
WWW2.RLCARRIERS.COM

*LTL - Truckload
Logistics*

One Call - One Carrier®

800.543.5589
www.gorlc.com



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[Rate Quote](#)

[Bill of Lading](#)

[Pickup Request](#)

▶ Shipment Tracing

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SPECIALIZING IN:

**LTL - Truckload
Logistics**

One Call - One Carrier.®

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Bill of Lading

Home > Shipping Tools > Bill of Lading

Ship in 1-2-3 Tools


- 1 Rate Quote**
For U.S., Canadian, or Offshore freight.
- 2 Bill of Lading**
Prepare freight to be picked up by R+L.
- 3 Pickup Request**
Arrange a time for R+L to pick up freight.

*** Other Tools**
Calculate transit times, view maps, etc.

Bill of Lading

All fields and sections are required unless they are noted as optional.

Date

Prepaid Collect  will need to indicate prepaid or collect

All freight charges are **PREPAID** unless marked collect.

1. Shipper Information

Shipper Name <input type="text" value=""/>	Shipper Email Address (optional) <input type="text" value=""/>
Shipper Address Line 1 <input type="text" value=""/>	Shipper Address Line 2 (optional) <input type="text" value=""/>
Shipper Country <input type="text" value="UNITED STATES"/> ▼	Shipper Zip <input type="text" value=""/>
Phone Number / Ext. <input type="text" value=""/>	Shipper City <input type="text" value=""/> ▼

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- [Shipment Tracing](#)

Related Information

- [LTL Shipping Services](#)
- [MyRLC Signup](#)



Shipment Tracing Notifications

BOL Legend

- Open Template Menu
- +@ Add From Address Book
- Save To Address Book
- Save As FSI
- +☆ Insert FSI into BOL

FSI = Frequently Shipped Item

2. Consignee Information

Consignee Name	Consignee Email Address (optional)
<input type="text"/>	<input type="text"/>
Consignee Address Line 1	Consignee Address Line 2 (optional)
<input type="text"/>	<input type="text"/>
Consignee Country	Consignee Zip
<input type="text" value="UNITED STATES"/>	<input type="text"/>
	Consignee City
	<input type="text"/>
Phone Number / Ext. (optional)	Consignee Attention (optional)
<input type="text"/>	<input type="text"/>

[Clear Section](#)

3. Bill To Information (optional section)

Bill To Name	Bill To Email Address (optional)
<input type="text"/>	<input type="text"/>
Bill To Address Line 1	Bill To Address Line 2 (optional)
<input type="text"/>	<input type="text"/>
Bill To Country	Bill To Zip
<input type="text"/>	<input type="text"/>
	Bill To City
	<input type="text"/>
Phone Number / Ext. (optional)	
<input type="text"/>	

Receive an email each time your shipment is marked out for delivery, delivered or both.






SIGN UP

6. Additional Services Needed (optional section)

- Origin Liftgate
- Destination Liftgate
- Inside Pickup
- Inside Delivery
- Residential/Limited Access (Orig.)
- Residential/Limited Access (Dest.)
- Delivery Notification
- Freeze Protection

check services required for shipment

7. Select Service Level

-  **Standard Service**
The value you've come to expect from R+L Carriers at an affordable price.
-  **Guaranteed Service**
Your shipment will arrive by 5:00 PM on the service date. *
-  **Guaranteed By Noon**
Your shipment will arrive by 12:00 PM on the service date. *
-  **Guaranteed Hourly Window**
Your shipment will arrive within hourly window** on the service date. *
-  **Expedited Service** ?
Need it faster? Our business critical solutions team offers overnight service plus a suite of other time sensitive solutions*
Expedited Quote Number

default is standard service. If different service is needed mark accordingly.

8. Item Information ⚠ Updated Hazmat Descriptions

ITEM 1 Check if Hazmat

Pieces	Pkg. Type	NMFC Item Number	Class	Weight

Description

[+ Add another item](#)

9. Hazmat Information (optional section)

Hazmat Emerg. # Hazmat Contract # (optional)

Offerer/Contract Holder (optional)

[Clear Section](#)

+ 10. Declared Value and Special Instructions (optional section)

+ 11. Reference Numbers (optional section)

Yes, please schedule a Pickup Request for this Bill of Lading. (optional)

must complete if hazmat shipment



add any PO#, etc. if needed



need to check if hazmat shipment



add another line to BOL if shipping more than one item



add any important instructions regarding shipment

ONCE COMPLETED -- HIT SUBMIT

Hazardous Materials

UN or NA Number: **Submit**

for hazmat shipments must include UN or NA number and then hit submit. The description of the product will populate below.

OK Cancel

9. Hazmat Information (optional section)

10. Declared Value and Special Instructions (optional section)

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[print / email and fax BOL](#)

[PRINT](#) | [EMAIL](#) | [FAX](#)

Bill of Lading Results (PRO # WW0295128)

Success! Your BOL has been successfully submitted. Your PRO # is WW0295128.

Use the menu below to keep working with this bill of lading.

A pickup has not been scheduled for this Bill of Lading, would you like to schedule one?

[Schedule Pickup](#)

Printing Options

[Print BOL](#)
[Print Shipping Labels](#)

Modify Bill of Lading

[Modify BOL](#)

can make any changes if needed

PRO #	BOL Date	Charges
WW0295128	10/5/2016	Prepaid

[Expand all fields](#)

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[Shipment Tracing](#)

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Shipment Tracing Notifications

In Real Time!
Receive an email each time your shipment is

1. Shippers name and address
2. Consignee's name and address
3. "Highlighting"

List the hazmat before non-hazmat commodities

Print the hazmat description in a different color, this is acceptable by DOT, however, we request shippers not do this due to the fact we scan, fax and copy our shipping papers and the colors will not show up to effectively use this method.

Mark an "X" or "RQ" in the HM column of a B.O.L.

4. Emergency response telephone number
5. Proper shipping name → (S)

- | | | | |
|------------------------------------|---|-----|--|
| 6. Hazard class | → | (H) | (Primary and subsidiary)
Column 6 in the HM Table |
| 7. Hazard identification number | → | (I) | |
| 8. Packing group | → | (P) | |
| 9. Weight of the hazmat entry | | | |
| 10. Number of packages | | | |
| 11. Type of packaging | | | |
| 12. Signed shipper's certification | | | |
| | | | " The signature must be legible |
| | | | " The signature may be mechanically entered |