

A Dependable Logistics, Inc.
11007 Northpointe Blvd, Ste C
Tomball, TX 77375
MC: 453982 P: 281-350-5505 F: 281-350-8808

LOAD NUMBER
189249

3/14/2024

DISPATCH CONFIRMATION

Carrier: Vincent Lewis
Houston, TX
Ph/Fax: 832-721-7400
Attn: Vincent

MCID:
Reference:
Trailer:

Driver:
Cell:
Truck:

Load Info		The Following Pay Is Authorized For This Load			
Pieces: 0	Miles: 63	Pay Code	Pay Type	Rate	Total
Space: 0	Pallets:	Load	Flat	430.00	430.00
Act Wgt: 46000	Type: Broker			Total	430.00
As Wgt: 46000	Trailer: 48' Flatbed				

Value:

Stop	From	To	Name Address	City Phone	St Zip	Ref Contact	Appt Appt Ref
1 PU	3/14 06:00	3/14 08:00	Bellville Tube Company 141 Miller RD	Bellville 832-391-0204	TX 77418	RON	No
2 Del	3/14 08:00	3/14 16:00	Bellville Tube Company JOB SITE HOUSTON DELIVER TO THE BOL ADDRESS		TX		No

Commodity	Description Reference	Pieces	Weight
		0	46,000
	Totals	0	46,000

Time is of the essence! Your performance is required as stated above. Do not take this load if you will be unable to fulfill the delivery date and time, due to ELD requirements. If dates & times cannot be met, you must communicate with our company to avoid a rate reduction consistent with any rate reduction imposed on us by our customer. YOU MUST SUPPLY COPY OF CUSTOMER'S BILL OF LADING WITH A LEGIBLE SIGNATURE WITHIN 30 DAYS OF DELIVERY. IF RECEIVED AFTER 30 DAYS YOU WILL NOT BE PAID FOR LOAD. Please send signed proof of delivery to ap@addshouston.com. Carrier invoice aging will begin on receipt of a legible signed bill of lading. Double brokering is not allowed. You will not be paid if you double broker this load.

ALL DRIVERS MUST BE LISTED ON CARRIERS INSURANCE. Any damage to or loss of freight due to negligence of driver or in the case of a vehicular accident is the sole responsibility of the carrier and could result in filing a claim on carriers insurance.

A Dependable Log Rate

A Dependable Logistics, Inc.

3/14/24

DATE:

Vincent Lewis

elewis66@sbcglobal.net

3/14/24

DATE:



Straight Bill of Lading - Short Form

Original - Not Negotiable

Date 3/14/2024Shippers No. 031424-009Carrier's No. 104OSI PO# 44994AVE LEWIS (ADDS)

Name of Carrier

Contact: ronm@belltubeco.com / c: 815-238-4420

Received, subject to the classifications and tariffs in affect on the date of the issue of this Bill of Lading

The property described below, in apparent good order, except noted (contents and conditions of packages unknown) marked, consigned and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any customer or corporation in possession of the property under contract) agrees to carry its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any said property over all or any portion of said route to said destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern, Western and Illinois freight classification in affect on the date hereof is this is a rail or a rail-water shipment or (2) in the applicable motor carrier classification or tariff is this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof set forth in the classification or tariff which governs the transportation of this shipment and the said terms and condition are hereby agreed by the shipper and accepted for himself and his assigns.

Consigned to WARBIRD TUBULAR

(Mail or street address of consignee - for purpose of notification only)

Destination WARBIRD TUBULAR State TX Country USA Delivery address * 11011 SHELDON ROADRoute HOUSTON, TX 77044

(* To be filled in only when shipper desires and governing tariffs provide for delivery thereat)

Delivery Carrier

Car or Vehicle Initials

No.

No. Packages	Kind of Package, Description of Article, Special Marks and Exceptions	Weight (lbs) (Subject to Correction)	Class or Rate	Check Column	C.O.D. charge to be paid by:	<input type="checkbox"/> Shipper <input type="checkbox"/> Consignee
	*****PRIME*****				Subject to section 7 of Conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement without payment of freight and all other lawful charges	
2	BDLS OF 24 PCS EA 3 1/2" 8.81# OCTG-UPG PE ERW R2 BTC NEW TUBING	1,584 ft	14,032			
	HEAT# 057415 LT PURPLE/GREY OSI PO# BTC - 0324043					
	*****PRIME*****					
4	BDLS OF 24 PCS EA 3 1/2" 8.81# OCTG-UPG PE ERW R2 BTC NEW TUBING	3,168 ft	27,992			
	HEAT# 3028315 LIME/GREY OSI PO# BTC - 0324043					
					If charges are not to be prepaid, write or stamp here, "To Be Prepaid"	
					Received \$ _____ to apply in prepayment of the charges on the property hereon	
					Agent or Cashier	
					Per _____ (The signature here acknowledges only the amount prepaid)	
					Charges Advanced:	
					\$ _____	
					Shippers imprint in lieu of stamp; not a part of Bill of Lading approved by the Interstate Commerce Commission	
6	BDLS WITH 144 PCS 4,752 ft	42,024				

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shippers weight.

NOTE - Where the rate is dependent on the 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 _____.

This is to certify that the above named articles are properly classified, described, packaged, marked and labeled, are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

The fibre boxes used for this shipment conform to the specifications set forth in the box marker's certificate thereon and all other requirements of the Consolidated Freight Classification.

Shipper: _____

Carrier: _____

Permanent post office address of shipper:
141 Miller Road, Bellville, Texas 77418

11:34 AM

ATTACHMENT
2 TO MCP11

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