



Rate Confirmation Agreement for Polaris Logistics Group, Inc.

- Rate shown includes any applicable fuel surcharges, pickup and delivery Charges, loading and unloading out of route, detention, storage, and/or all arbitrary charges etc. Deviation from these rates must be approved in writing and signed by both parties.
- Any authorized unloading will only be reimbursed with a valid unloading receipt.
- Pickup notification calls, delivery notification calls, and daily check calls are required by 9am.
- If pickup or delivery times are missed without prior notification **to Polaris Logistics Group, Inc.**, carrier may be subject to penalty charges. Additional late delivery charges may also be assessed by the consignee.
- In order to collect detention carrier must notify **Polaris Logistics Group, Inc.**, with 1.5 hours after appointment time of any delays. Late pick-ups or late deliveries are not eligible for detention charges. If facility is FCFS, detention will only be paid if carrier is loaded or unloaded outside of the regular pick-up or delivery hours. If applicable, the arrival and departure times must be stamped and/or written on the BOL.
- All refrigerated loads must be run on continuous unless otherwise stated.
- Driver is responsible for all load counts. If driver is not granted access to the loading dock, they must call Polaris Logistics Group, Inc., to notify immediately.
- Any directions given to the carrier are for informational purposes only.
- Carrier acknowledges that they are solely responsible for compliance with all applicable HOS regulations, as well as all other FMCSA regulations.
- No drivers are authorized to break seals under any circumstances. Seals must only be broken by the consignee's personnel. Loads delivered without the seals intact may result in fines and potential claims.
- Carrier agrees this shipment will not be re-brokered or said carrier forfeits the right to collect charges.
- Carrier representative submission with acceptance and signature indicates approval of all rates and terms listed on rate confirmation.
- QuickPay via ACH is available for a 3% fee, with payment sent in 1-3 business days.
- Please send invoice, along with load confirmation, signed POD, and applicable miscellaneous paperwork such as lumper receipts to ACCOUNTING@POLARISLOGISTICSGROUP.COM.
- **For all payment inquiries and accounting related questions call accounting directly at 419-214-5969.**

Polaris Logistics Group, Inc.
www.polarislogisticsgroup.com

Polaris Logistics Group Inc. (SLC)
100 N. Summit St. #400
Toledo, OH 43604
P: 832-699-3297 F: 832-383-9234
Accounting# 419-214-5969



Page 1

Load Confirmation

0257919

Carrier: Eye1 Global Services LLC
Mansfield TX 76063
Date: 11/14/2023

Contact: Rollin Stevenson
Phone: 214-334-5376
Fax:

Order
Order: 0257919
Miles: 13.0
Temp:
Ref# PT06544881

Commodity: Cardboard boxes
Weight: 35000.0
Trailer: Van
Reference: TMW6544881

PU 1 **Name:** Pratt Retail- Dallas
Address: 9209 Old Hickory Trail
DALLAS TX 75201
Phone: 469-650-8512

Date: 11/15/2023 1100
11/15/2023 1100
Contact: Desiree Wilson
Driver Load: No driver loading or unload

SO 2 **Name:** Temperatsure llc
Address: 2250 Morgan Pkwy
FARMERS BRANCH TX 75234
Phone:

Date: 11/15/2023 1100
11/15/2023 1600
Contact:
Driver Load: No driver loading or unload

Payment
Carrier Freight Pay: \$250.00
Total Carrier Pay: \$250.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.
Pratt Retail- Dallas - 10 year trailer rule Pratt Retail- Dallas - REF#: RCP19DF Pratt Retail- Dallas - PO 40350

Please Sign: Rollin Stevenson

(X) Accept

() Decline

Load Tracking Required


Pro #: 0257919
Tractor #: 305
Trailer #: 65606

Driver Name: Rollin Stevenson
Driver Cell: 214-334-5376



0257909

Polaris Logistics Group Dispatcher: Jack Ray
832-699-3297

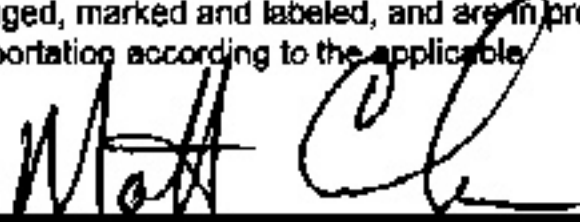
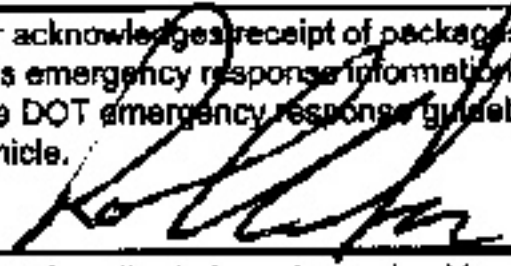
Date: 11/15/2023		BILL OF LADING		Page 1 of 1	
SHIP FROM			Bill of Lading		
Name Pratt Retail - Dallas Address: 9209 Old Hickory Trail Ste 100 City/State/Zip Dallas, TX 75237-0000 SID# _____ FOB: <input type="checkbox"/>			2307939  Carrier: POLARIS App 15-NOV-23 00.00.00 Trailer 65606 Arr Time: 15-NOV-23 12.32.48 Seal 55061172 Dept Time: 15-NOV-23 13.11.07		
SHIP TO			SCAC: POLT Pro number: Shipment ID: 6544881 Driver Name: ROLLIN BAR CODE SPACE Pratt ASN ID: CP19DF		
Name TEMPERATSURE LLC Address: 2250 MORGAN PARKWAY City/State/Zip FARMERS BRANCH, TX 75234 CID# _____ FOB: <input type="checkbox"/>					
THIRD PARTY FREIGHT CHARGES BILL TO:					
Name: Address: City/State/Zip:					
Special Instructions:			Freight Charge Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> (check box) This is a Master Bill of Lading with attached underlying Bills of Lading		
Customer Order Information					
Customer Order Number	# Items	WEIGHT	Pallet/Slip (CHECK ONE)		Additional Shipper Info
40350	40	23400	X		
Carrier Information					
COMMODITY DESCRIPTION			NMFC #	CLASS	WEIGHT
Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360					
Corrugated Boxes, KDF (PCF 6-8)			29785-5	125.0	23400
Grand Total			40 UNIT(S)		23400

Received

Luke Martinez

L.M.

11-15-23 L.M.

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:		COD Amount: _____	
"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ Per _____"		Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A)			
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, and to all applicable state and federal regulations. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.			
Shipper		<input type="checkbox"/> Pick up the pallet(s) from any previous deliveries Stretchwrap Intact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
SHIPPER SIGNATURE / DATE		CARRIER 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.		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 documentation in the vehicle.	
X  Date: 11/15/23		X  Date: 11/15/23	
Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Units said to Contain <input type="checkbox"/> By Driver/Pieces		Property described above is received in good order, except as noted.	

Unit & Quantity count accuracy assured by
Matthew Coleman



9209 Old Hickory Trail Ste 100
Dallas, TX 75237-0000

DELIVERY TICKET

BOL# 002307939 Trip CP19DF

Cust Service (855) 697-7288 Dispatch (855) 697-7288

Time
13:11:16

Status Ticket#
PrePaid TX2307939

Date
2023-11-15

96 4317 FTX

Ship To
TEMPERATSURE LLC
DBA NORDIC ICE
2250 MORGAN PARKWAY
FARMERS BRANCH TX 75234

POLARIS TRANSPORTATION

Pro# NONE

Trlr# 65606

Seal# 55061172

ShipmentID 6544881

9663715	40350	2BOX	24	520			12,480	87610	14190
		CW 15X10.25X8.75 55C K NO.2							
9663716	40350	2CMBOX	10	520			5,200	40664	6588
		CW 15.375X10.75X9.75 55C K NO.2CM							
9663717	40350	2DIVIDER	5	2,520			12,600	22932	2356
		CW 17.5X15 D/C INSERT NO.2							
9663714	40350	23-CELLDIVIDER	1	1,500			1,500	2595	266
		CW 30.1875X8.25 D/C INSERT NO.2-3							
ORIGINAL									
* * * DELIVERY CONTACT * * * * *									
Name									
Phone () Ext. FAX ()									
								153801	23400

Received by _____ Date _____ Time _____