

HAZMAT LOAD CONFIRMATION

Load Information

Load Number:

Pickup Date/Time:

Delivery Date/Time:

Carrier Information

Carrier Name:

MC #:

DOT #:

Shipper

Name:

Address:

Contact:

Consignee

Name:

Address:

Contact:

Hazmat Details

UN Number	Proper Shipping Name	Hazard Class	Packing Group	Quantity	Packaging Type

Special Instructions

Carrier Representative Signature

Date