



## 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](mailto: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](http://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



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**Load Confirmation**

**0251097**

**Carrier:** EYE1 GLOBAL SERVICES LLC  
MANSFIELD TX 76063  
**Date:** 09/13/2023

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

**Order**  
**Order:** 0251097  
**Miles:** 13.0  
**Temp:**  
**Ref#** PT06438654

**Commodity:** Cardboard boxes  
**Weight:** 35000.0  
**Trailer:** Van  
**Reference:** TMW06438654

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

**Date:** 09/13/2023 1100  
09/13/2023 1100  
**Contact:** Desiree Wilson  
**Driver Load:** No driver loading or unload

**SO 2** **Name:** Nordic Ice  
**Address:** 2250 Morgan Pkwy  
FARMERS BRANCH TX 75234  
**Phone:**

**Date:** 09/13/2023 1200  
09/13/2023 1600  
**Contact:**  
**Driver Load:** No driver loading or unload

**Payment**  
**Carrier Freight Pay:** \$300.00  
**Total Carrier Pay:** \$300.00

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

**Please Sign:** Rollin Stevenson

**(X) Accept**

**( ) Decline**

**Load Tracking Required**


**Pro #:**  
**Tractor #:** 305  
**Trailer #:** 65606

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



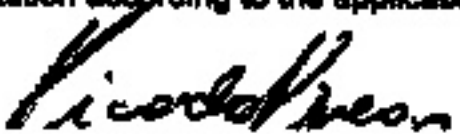
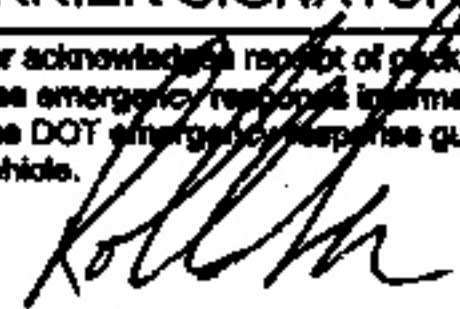
0269007

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

Date: 09/13/2023		<b>BILL OF LADING</b>		Page 1 of 1		
SHIP FROM			Bill of Lading			
Name <b>Pratt Retail - Dallas</b> Address: <b>9209 Old Hickory Trail Ste 100</b> City/State/Zip <b>Dallas, TX 75237-0000</b> SID# _____ FOB: <input type="checkbox"/>			2240846  Carrier: <b>POLARIS</b> App <b>13-SEP-23 00.00.00</b> Trailer <b>65606</b> Arr Time: <b>13-SEP-23 12.19.46</b> Seal <b>49703595</b> Dept Time: <b>13-SEP-23 13.35.10</b>			
SHIP TO			SCAC: <b>POLT</b>			
Name <b>TEMPERATSURE LLC</b> Address: <b>2250 MORGAN PARKWAY</b> City/State/Zip <b>FARMERS BRANCH, TX 75234</b> CID# _____ FOB: <input type="checkbox"/>			Pro number: Shipment ID: <b>6438654</b> Driver Name: <b>ROLLIN</b>			
SHIP PARTY NAME / ADDRESS / CITY / STATE / ZIP			BAR CODE SPACE			
Name: Address: City/State/Zip			Pratt ASN ID: <b>CN43JR</b>			
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 Data						
Customer Order Number		# Items	WEIGHT	Pallet/Slip (CHECK ONE)	Additional Shipper Info	
35753		43	26862	X		
Commodity Description						
Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 380				NMFC #	CLASS	WEIGHT
Corrugated Boxes, KDF (PCF 6-8)				29785-5	125.0	26862
Grand Total				43 UNIT(S)		26862

X

Hdz. Received  
9/13/23

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		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: _____		X  Date: <b>9/13/23</b>	
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			