



211 SURVEY FORM Electronic Bill of Lading

Customer Information

Name: _____
Address: _____
Web Site: _____



EDI Contact

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Traffic / Business Contact

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____

Name: _____
Title: _____
Phone: _____
Fax: _____
E-mail: _____



211 Information

➤ **ABF Salesperson:** _____

➤ **Projected completion date for installation:** _____

➤ **Addresses for locations requesting 211's:**

1.	2.	3.	4.

➤ **Network in use:** _____

➤ **211 Transmit Times:**

➤ **Type of header:** — ISA
 — BG

➤ **Header Information:**

BG02: _____	BG02: Password
BG04: _____	BG04: Receiver ID
ISA05 / 06: _____	ISA05 / 06: Qualifier / Receiver ID
GS02: _____	GS02: Receiver ID

➤ **Version of Standards:** ANSI - _____
 TDCC - _____

➤ **Time frame to parallel with the paper bill of lading:**

➤ **Customer location contact person, if freight arrives without electronic bill of lading:**

Name: _____
Title: _____
Address: _____
City, State, Zip: _____
Phone before 5:00: _____
Phone after 5:00: _____

➤ **Procedure used to ensure freight is ready to be picked up day requested:**



➤ Procedure used to ensure electronic bill of lading number matches printed copy:

NOTE: All parties hereto and their assigns are familiar with and agree, that this bill of lading is subject to: (1) the contract terms and conditions of the uniform domestic straight bill of lading as set forth in the National Motor Freight Classification, and (2) the applicable tariff and classifications in effect as of the data hereon.

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:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Traffic Department Signature: _____

Title: _____

MIS Department Signature: _____

Title: _____

A trailer manifest is **mandatory** for the electronic bill of lading.

Y2K Information

➤ EDI applications Y2K compliant: Yes
 No

➤ If not, will be Y2K compliant by: _____

➤ Currently using version 4010: Yes
 No

➤ If not, will be using 4010 by: _____

➤ List any additional Y2K information below or attach:

➤ Person filling out form:

Name: _____

Phone: _____

Date: _____

➤ Please return form via: (mail) **ABF Freight System, Inc.**
EDI Department – 2E.02
P. O. Box 10048
Ft. Smith, AR 72917- 0048

-or-
(fax) (479) 784-8599