BIMCO
Shipper
Consignee

BIMCO BLANK BACK FORM OF LINER BILL OF LADING 2016

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Shipper			Bill of Lading No.	Refere	Reference No.		
Consignee Notify address			Vessel	/essel			
Pre-carriage by †			Port of loading		Port of discharge		
Place of receipt by pre-carrier †							
Place of delivery by on-carrier †							
Marks and Nos.	Number and kind of packages; description of goods Gross weight Measurement						
Particulars furnished by the Merchant							
Freight details, charges etc.	RECEIVED the goods as specified above according to Shipper's declaration in apparent good order and condition (unless otherwise stated herein) weight, measure, marks, numbers, quality, contents and value unknown.						
	The contract evidenced by this Bill of Lading is subject to the exceptions, limitations, conditions and liberties (including those relating to pre-carriage and on-carriage) set out in the Carrier's Standard Conditions of Carriage applicable to the voyage covered by this Bill of Lading and operative on its date of issue. If the Carrier does not have Standard Conditions of Carriage, this Bill of Lading is subject to the exceptions, limitations, conditions and liberties set out in the "Conlinebill" Liner Bill of Lading operative on						
Daily demurrage rate (if agreed)	its date of issue. The "Conlinebill" Liner Bill of Lading and the Carrier's Standard Conditions of Carriage incorporate or are deemed to incorporate the Hague Rules contained in the Brussels Convention dated 25th August 1924 and any compulsorily applicable national enactment of either the Hague Rules as such or as amended by the Hague-Visby Rules contained in the Brussels Protocol dated 23rd February 1968.						
Freight payable at	A copy of the Carrier's Standard Conditions of Carriage applicable hereto may be inspected or will be supplied on request at the office of the Carrier or the Carrier's Principal agents. IN WITNESS whereof the number of original Bills of Lading stated below have been signed, all of the tenor and date, one of which being accomplished, the others to be void.						
Number of original Bills of Lading			Place and date of issue				
Carrier:(insert name)							
Signature:(Carrier*/Master*/Agent*) *Delete as appropriate							
If signed by an Agent indicate with a tick ☑ whether for and on behalf of:							
□ Master; or							
□ Carrier							
Agent(insert name)							

[†] Applicable only when document used as a Through Bill of Lading.