

Shipper Request Form

Shipper Information Name

Address 1

Address 2

City

State

Zip

Telephone:

Origin (City, State)

Destination (City, State)

Contact Name:

Email:

Type of Railroad Equipment:

Boxcar

Intermodal

Open Top

Commodity: _____ STCC Code: _____

Servicing Railroad

Specifications of Commodity: (in. – mm.)			(lbs. – kg.)
Length	Width	Height	Weight

Pallet Specifications: (in. – mm.) – (lbs. – kg.)							
	Length	Width	Height	Weight	Stackable (Yes / No)	4-Way Pallet (Yes/No)	Quantity
Pallet 1							
Pallet 2							
Pallet 3							

Pallet Specifications: (in. – mm.) Overhang (+) / Under hang (-)	Length (in. – mm.)	Width (in. – mm.)
Pallet 1		
Pallet 2		
Pallet 3		

Commodity to Pallet Securement	Lading Securement
Shrink Wrap	Rubber Mat
Metallic Strapping	TyGard
Type 1A Strapping	Pneumatic Dunnage
Type IV PET Strapping	Wood
Other	Steel / Non-Metallic Strapping

Shipper requested visit
 Shipment Date (mm/dd/yyyy)
 Loading Date 1
 Loading Date 2
 Dunnage available

In the event the "Attach Photos and Load Plan" Button does not work, please email all Closed Car & Intermodal info to: Michael.Sandoval@nscorp.com : Open Top info to: Lindy.Pope@nscorp.com