



Commodity Classification Standards Board
 1001 North Fairfax Street, Suite 600, Alexandria, VA 22314
 703.838.1810 fax: 703.683.1094
 email: ccsb@nmfta.org

PROPOSAL TO AMEND THE NATIONAL MOTOR FREIGHT CLASSIFICATION

It is essential that you provide detailed information relating to the transportation characteristics of the involved product, so please respond to all questions as completely as possible. You are encouraged to submit a supporting statement along with any studies you may have conducted, including all underlying raw data. Any other information available that would help identify or explain the product, such as advertising literature, product sheets or photographs, is also requested.

In accordance with the Commodity Classification Standards Board's procedures, the information you furnish—except certain confidential information, as denoted herein **in red**—will be included in a Public Docket File and made available to all persons having an interest in the proposal. The CCSB's procedures are available online at www.nmfta.org.

If you have any questions or require technical assistance, please contact our staff at 703-838-1810 or ccsb@nmfta.org.

Your Name _____ Title _____

Company _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Email _____ Website _____

Signature _____

- 1 Brief description of the involved product —

- 2 Trade name or advertising nomenclature —

- 3 Material construction or consist (*Please be as specific as possible, and list all materials or ingredients in order of predominance, with percentages if available.*) —

- 4 When proponent is a shipper —
 - a) What percent of the market for the involved product does your company represent? _____ %
 - b) Please provide the name and address of your major/primary competitor(s):

- 5 When proponent is a carrier, please provide the name and address of the involved shipper(s):

TRANSPORTATION CHARACTERISTICS

- 1 Claims experience (*motor carrier shipments only*) —
- a) Number of claims on the involved product (one-year period) _____ Dollar amount of claims* \$ _____
- b) Percentage of claims filed by shipper (consignor) _____ % receiver (consignee) _____ %
- c) If the information is available, please indicate the percentage of claims for:
Loss _____ % Damage _____ %
- d) Number of shipments of the involved product (one-year period) _____
- e) Amount of freight paid for the involved product (one-year period)* \$ _____

** A claims ratio, i.e. the ratio of claims dollars to the amount of freight paid, may be included in the Public Docket File, but the actual dollar amounts will be kept confidential.*

- 2 Product is dry _____ liquid _____ paste _____
- 3 Is the product subject to U. S. Department of Transportation regulations governing hazardous materials?
Yes _____ No _____ If yes, what are the DOT hazard class and UN number, and what label(s) is required? _____

- 4 Does the product require temperature control? Yes _____ No _____
If yes, please specify _____
- 5 As shipped, are there any exposed projections, edges or extensions? Yes _____ No _____
If yes, please describe _____
- 6 Is the freight palletized? Yes _____ No _____ If yes, are the pallets unitized? Yes _____ No _____
- 7 Is more than one person needed to load or unload the freight? Yes _____ No _____
- 8 Is the freight compatible with mechanical handling equipment? Yes _____ No _____
If yes, what type? _____
- 9 Are there precautionary markings or instructions on the shipping package(s) or shipping documents?
Yes _____ No _____ If yes, what are they? _____
- 10 Is the freight top heavy or does it have a balance point that requires special handling? Yes _____ No _____
- 11 Does the product require any special handling in loading or unloading? Yes _____ No _____
If yes, please explain _____
- 12 Does the product require floor loading or special placement in the vehicle? Yes _____ No _____
If yes, please describe _____
- 13 Does the freight require a special orientation, such as being loaded in an upright position? Yes _____ No _____
If yes, please describe _____
- 14 Can the freight be stacked (tiered) in conventional trailers? Yes _____ No _____
If yes, what is the stack height? _____
- 15 As shipped, does the product provide a regular, load-bearing surface for top freight? Yes _____ No _____
- 16 If the product is wheeled, does it rest on its own wheels during shipment? Yes _____ No _____
- 17 Does the product require blocking or bracing for safe transportation? Yes _____ No _____
- 18 Is the product magnetically sensitive? Yes _____ No _____
- 19 Does the product contain magnetic materials? Yes _____ No _____

PROPOSAL

PRESENT CLASSIFICATION *(Show the provisions of the National Motor Freight Classification that currently apply.)*

ITEM NO.	DESCRIPTION	CLASS
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PROPOSED CLASSIFICATION *(Show description(s) and class(es) as you propose them to be established in the National Motor Freight Classification.)*

ITEM NO.	DESCRIPTION	CLASS
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JUSTIFICATION *(Please state your reasons for the proposed changes.)*
