



IDENTITY PRESERVED CLEAN TRUCK/TRAILER CERTIFICATE

The Driver/Owner Operator is Responsible for Proper Identification and Providing a Clean Trailer

Eclipse Confirmation # _____

Shipper/Producer's Name: _____ Date: _____

Shipper/Producer's Address: _____ City: _____ State: _____

Shipper/Producer's Phone Number: _____

Product: _____ Load Number: _____

Bill Of Lading Number: _____ Seal Numbers: _____

TO BE COMPLETED AND SIGNED BY THE OWNER OPERATOR

Carrier Name: _____ Trailer #: _____ Trailer Plate #: _____

Previous Product On This Trailer Last: _____

Previous 2nd Product On This Trailer If Customer Requires: (2nd): _____

Previous 3rd Product On This Trailer If Customer Requires: (3rd): _____

Box/Ledges/Tarp Bows/Ridge Poles/Tarp were inspected and Clean: Yes _____ No _____

IF YOUR PREVIOUS LOAD IS A MAMMALIAN PROTEIN PRODUCT IN REFERENCE TO FDA REGULATION 21 CFR PART 589.2000 THE TRAILER REQUIRES A WASHOUT

This semi-trailer/container/truck was: swept air blown washed (circle all that apply)

Washout Name: _____ Washout Phone #: _____

Washout Address: _____ City: _____ State: _____

I have attached a copy of the washout receipt dated: _____ Receipt # _____

I verify that the trailer meets cleanliness requirements as specified on the Eclipse Transervices Corporation load confirmation and any additional clean trailer requirements included with the load confirmation that is required by the customer. The trailer is well maintained and suitable to haul food grade products.

Drivers Printed Name: _____ Drivers Signature: _____

Please circle 1 or 2

To Be Completed By the Producer/Shipper/Loader:

1 The truck was inspected by me or my representative and was cleaned prior to loading and was free of foreign material and/or contaminants that could result in the rejection of the load.

2 We do not inspect trailers.

Producer/Loader Printed Name _____

Signature: _____

The IDENTITY PRESERVED CLEAN TRUCK/TRAILER CERTIFICATE must be turned in with all original paperwork for this load including but not limited to: The Origin Scale Ticket, Destination Scale Ticket, Original Bill Of Lading with a legible signature from the receiver and Wash Receipt (if required) to Eclipse Transervices Corporation in order to be paid for the load. You are authorized to copy this document for Shippers and Receivers if requested