
	Title: USDIST_TOC: GSK Pharmaceuticals Transportation Routing Guide and Request Form		
	Zebulon Form	Effective Date: 1/30/2019 12:00:00 AM Status: App For Training	Document ID: FRM03783 Version: 3.0; Most-Recent; App For Training

U.S. Transportation: GSK Pharmaceuticals Routing Guide – US Domestic Use Only



NOTE: Sender: Please complete the form prior to sending the request

GlaxoSmithKline (GSK Pharma) shipments must be pre-approved by GSK Pharma and transported by GSK Pharma approved carriers in order for GSK Pharma to assume responsibility for freight charges.	
Supplier Compliance will enable GSK Pharma to satisfy business requirements, mitigate risk, optimize transportation and improve shipment visibility. Failure to comply with these routing instructions will result in freight charges being redirected to the Pharma supplier or deducted from the Pharma supplier invoice.	
Pharma supplier compliance reports will be generated as follows: <ul style="list-style-type: none"> Compliant Shipment = when the Pharma supplier submits the routing request in accordance with routing instructions. Non-Compliant Shipment = when the Pharma supplier fails to utilize an approved carrier or fails to follow routing instructions. 	
Pharma Transportation Operations Center (TOC) hours of operation are 7:30 a.m. – 5:30 p.m. Eastern U.S.	
Pharma TOC = 1-800-286-4191 U.S.	Pharma TOC = YZX78129@gsk.com
Once GSK Pharma has granted shipping approvals, please call the TOC at least 72 hours in advance of pickup for the following:	
FINISHED GOODS *	DANGEROUS GOODS *
TEMPERATURE CONTROLLED *	EXPEDITED and/or AIR CARGO *
HIGH VALUE and/or SPECIAL HANDLING *	PUERTO RICO and/or THIRD PARTY *
MORE THAN 10 SKIDS and/or OVER 4000 POUNDS and/or REQUIRING OVER ¼ OF TRAILER FLOOR SPACE *	
The following information is required and must be provided to the Pharma TOC when transport routing is requested: <ul style="list-style-type: none"> Notification of shipment contents including dangerous goods classification. Special pickup, transport or delivery requirements (e.g. temp control, urgent delivery, lift gate service, dual driver protection). GlaxoSmithKline Pharma approved reference number. * GlaxoSmithKline Pharma Contact who authorized the purchase. Shipments characteristics including pallet count, piece count, dimensions, piece weight, total weight. Shipper Name, Street Address, City, State, Zip Code, Contact Name, Telephone Number, Email Address. Consignee Name, Street Address, City, State, Zip Code, Contact Name, Telephone Number, Email Address. Requested pickup date & time, requested delivery date & time. Shipper and/or Consignee Hours of operation. 	
Shipments originating from a non-GSK Pharma location destined for a GSK Pharma site should be sent “Freight Collect” with transport documents referenced on the shipping site prepared bill of lading. Please contact your GSK Pharma Buyer or Liaison with questions on freight terms.	
Once GSK Pharma has granted shipping approvals, the following routings may be executed without TOC contact:	
1 - 200 POUNDS Parcel / Small Package Ground Transport	UPS Ground Parcel via GSK Pharma provided bill-to account. *
201 - 3999 POUNDS Palletized Ground Transport	Old Dominion Freight Lines LTL. *
Please direct freight claims inquiries to the TOC.	Shipment tracking available via carrier website or the TOC.
Shipments not advance authorized by GSK are prohibited.	Non-business shipments are strictly prohibited.
Billing address for non-Parcel (e.g. LTL, TL) shipments pre-approved for freight payment by GSK Pharma: <ul style="list-style-type: none"> GlaxoSmithKline Pharma, c/o CTSL, 5100 Poplar Avenue, Suite 1750, Memphis, TN 38137 Phone: 901-766-1500 	
Charges associated with last minute cancellations will be charged back to the supplier or deducted from the supplier invoice.	
* GlaxoSmithKline approved reference number (e.g. GSK cost center, GSK purchase order, GSK PAR number, GSK Study number) MUST be referenced on Bill of Lading / Air Bill. If unknown, please contact your GlaxoSmithKline Pharma Buyer or Liaison to obtain this information. Shipments with NO GlaxoSmithKline APPROVED REFERENCE NUMBER will be charged back to the supplier or deducted from the supplier invoice. Shipping site to contact local carrier terminal to arrange pickup.	

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Transportation Mode Requested (Yes/No)	
Parcel-UPS	
LTL-Old Dominion Freight Lines	
Truckload	
Shipper Information	
Company Name	
Requested Pickup Date (72 hours minimum notice required)	
Requested pickup time or shipping hours	
Address with contact name and phone number	
Consignee Information	
Company name	
Requested delivery date	
Requested delivery time or receiving hours	
Address with contact name and phone number	
Does shipment contain Hazmat, Dry Ice, Lithium batteries, Biological Category A or B? If Yes, please provide	
Product	
UN Number	
Class	
Safety Data Sheet	
Special Requirements	
Temperature control (Y/N)	
Temperature Target	
Acceptable temperature range	
Other requirements (lift gate, rush delivery, dual driver, Temperature-Validated)	
Product Description	
Product type	
Weight	
Pallet count	
Reference# or PO#	
Dimensions of largest shipping container	
Transport Charge Responsibility	
GSK responsible for freight expense (Y/N)	
Cost Center or GSK approved reference#	
GSK buyer or shipment requestor	

**History of Change**

Version: 2.0				Owner: Stephen L Wilson	Prepared by: Scot Stinson
Old Page	Old Section	New Page	New Section	Change(s)	Reason(s)
N/A	N/A	N/A	N/A	Clarified Billing Address Zip Code and Phone Number	Contact information update

Version: 3.0				Owner: Stephen L Wilson	Author: Scot Stinson
Old Page	Old Section	New Page	New Section	Change(s)	Reason(s)
1	N/A	1	N/A	Updated Request to Pick-up from 48 to 72 hours; Clarified transport information is referenced on the shipping site's prepared Bill of Lading; Clarified that shipping site will contact local carrier terminal to arrange pick-up	Process Update Process Clarifications
2	Shipper Inform.	2	Shipper Inform.	Updated Requested Pick-up date time from 48 to 72 hours minimum notice required	Process Update

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Document Approval Record

Signed by:	Date (GMT):	Reason For Signing:
Wilson_Stephen_L	01/08/2019 22:28	Approve Change Notice and associated document
Pittard_Randy	01/11/2019 02:37	Approve Change Notice and associated document
Stinson_Scot	01/14/2019 14:49	Approve Change Notice and associated document