

FAX

Date: 10/26/2010**Pages including cover sheet:** 3

To:	
<i>Phone</i>	
<i>Fax Number</i>	+1 (647) 435-5876

From:	ALEXANDER PRADO
<i>Phone</i>	+1 (352) 414-1662
<i>Fax Number</i>	+1 (352) 414-1662

NOTE:

ALX Auto Transport**INVOICE**

35 Juniper Pass Trail
Ocala, FL 34480
Tel: 352 245-1215
Fax 352 414 -1662
ALXAUTOTRANSPORT@HOTMAIL.COM

DATE: 10/01/10
INVOICE: 365

Bill To:**For:**

Transportation Services

Makmal North America

92 Dovetail Drive
Richmond Hill, ON L4E5A7

Tel: 416 834 9505

Tel: 647 477 3310

Fax: 647-435-5876

647 840-5849

LOAD ID - BL#	ORIGIN	DESTINATION	AMOUNT
Order ID: 2109 07, LEXUS RX 350	Ocoee, FL	Newark	\$350.00 Quick pay
TOTAL			\$350.00

THANK YOU FOR YOUR BUSINESS!

UNIFORM BILL OF LADING
**CONDITION
REPORT****ALX AUTO
TRANSPORT**

US DOT 1552426

alxautotransport@hotmail.com

Tel: (352) 246 1216

ICC MC676697

Fax: (352) 414 1662

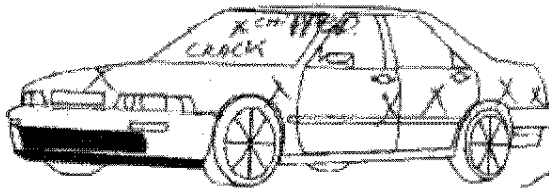
Consignee MAKMAI NORTH AMERICACity ORLANDO St. FL Phone

Customer Name

Acct #

Stock #

YEAR	MAKE	MODEL	DOORS	BODY TYPE	EXT COLOR	INT COLOR	MILEAGE	ODOMETER
07	Lexus	RX350	5	CP <input type="checkbox"/> SD <input type="checkbox"/> MB <input type="checkbox"/>	Silver			
VIN. SERIAL NUMBER								
7C022109								
RADIO <input type="checkbox"/> INOP <input type="checkbox"/> MISSING <input type="checkbox"/> STEREO <input type="checkbox"/> W/FAE <input type="checkbox"/> TRUNK KEY <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> W/FAE <input type="checkbox"/> W/CD <input type="checkbox"/> CD CART <input type="checkbox"/> KEYLESS ENTRY <input type="checkbox"/>								
FUEL <input type="checkbox"/> FULL <input type="checkbox"/> 3/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 1/4 <input type="checkbox"/> EMPTY OVERALL CONDITION OF VEHICLE <input type="checkbox"/> CLEAN <input type="checkbox"/> RUSTY <input type="checkbox"/> SALVAGE <input type="checkbox"/> CORROSION <input type="checkbox"/> NO								
LICENSE PLATE <u>NO</u> STATE <u>FL</u>								


☐ AIR SHIELD DAMAGED
 ORIGINAL INSPECTION

CONSIGNEE SIGNATURE

DRIVER SIGNATURE

DATE

WEATHER CONDITION AT TIME OF INSPECTION

☐ PLAIN ☐ SNOW ☐ ICE ☐ EXT. DIRTY

☐ FRAME/UNIBODY ☐ DAMAGE LOCATION
☐ TIE DOWNS ☐ DAMAGE LOCATION

DAMAGE LEGEND					GLASS		
SCR	DNG	DENT	DAMG	PREV REPAIR	CHIPPED	CRACKED	BROKEN
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DAMAGES MUST BE MARKED AS THEY APPEAR ON VEHICLE					WINDSHIELD <input type="checkbox"/> CRACKED <input type="checkbox"/> BROKEN <input type="checkbox"/> WINDOW <input type="checkbox"/> CRACKED <input type="checkbox"/> BROKEN <input type="checkbox"/>		
TIRES							
TIRES THREAD DEPTH REMAINING							
(Circles if less than 1.8")							
GOOD	FAIR	POOR	MISMATCH	BRAND			
FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
FR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
RR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
LR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
WHEEL COVERS <input type="checkbox"/> MISSING <input type="checkbox"/> NONE <input type="checkbox"/> MISSING <input type="checkbox"/>							

DAMAGE DESCRIPTION						
(✓) APPROPRIATE BLOCK						
AREA	OK	SCR	DNG	DENT	DAMG	PREV REPAIR
Front Bumper						
Grill						
Hood						
LF Fender						
LF Door						
LR Door						
L Rocker Panel						
Left Qtr. Panel						
Deck Lid						
Rear Bumper						
R. Qtr. Panel						
RR Door						
RF Door						
R Rocker Panel						
RF Fender						
Roof						

INTERIOR CONDITION			
DASH	<input type="checkbox"/> GOOD	<input type="checkbox"/> WORN	<input type="checkbox"/> DAMAGED
FRONT CARPET	<input type="checkbox"/> GOOD	<input type="checkbox"/> WORN	<input type="checkbox"/> BURN HOLES
FRONT SEAT	<input type="checkbox"/> GOOD	<input type="checkbox"/> WORN	<input type="checkbox"/> BURN HOLES
HEADLINER	<input type="checkbox"/> GOOD	<input type="checkbox"/> TORN	<input type="checkbox"/> BURN HOLES
REAR CARPET	<input type="checkbox"/> GOOD	<input type="checkbox"/> TORN	<input type="checkbox"/> BURN HOLES
REAR SEAT	<input type="checkbox"/> GOOD	<input type="checkbox"/> TORN	<input type="checkbox"/> BURN HOLES
FLOOR MATS	<input type="checkbox"/> GOOD	<input type="checkbox"/> TORN	<input type="checkbox"/> BURN HOLES
DOOR PANELS	<input type="checkbox"/> GOOD	<input type="checkbox"/> TORN	<input type="checkbox"/> BURN HOLES

DELIVER TO:

NAME	TRT	DATE	NO TITLE
STREET	196 MARACAIBO ST		
CITY	NEWARK, NJ	STATE	ZIP
CD	19233447100	PHONE	

FINAL INSPECTION	
DAMAGES WHICH OCCURRED IN TRANSIT MUST BE NOTED HERE AND SIGNED FOR BY RECEIVING AGENT AND DRIVER (NO EXCEPTIONS)	
<input type="checkbox"/> No Transit Damage <input type="checkbox"/> Vehicle Dropped S.T.I. <input type="checkbox"/> Transit Damage as follows:	Date <u>10/4/10</u> Signature <u>[Signature]</u>
Receiving Agent Signature	Driver Signature

NOTE: ALX AUTO TRANSPORT WILL NOT BE LIABLE FOR THE FOLLOWING: Damage caused by other carrier, leaking fluid, battery, air conditioning system, and freeze or thawing resulting from Acts of God. Damage unable to detect due to Auto's duty Mechanical Functions, under carriage, structural weakness, alignment, and suspension. Inspection of these items is not practical at time of shipment.