

Transplace Texas, LP
C/O Transflo
PO Box 9349 Louisville, KY 40209
479-770-7587

SEND INVOICE TO:
QuickPay Carriers: QuickPay@transplace.com
Standard Terms: APShared@transplace.com
INQUIRIES: paystatus@transplace.com

TRANSPLACE

*** Carrier Confirmation ***

Date: 10/29/2021
Order #: 1089886

Carrier: DUBAI EXPRESS HAUL LLC
LEXINGTON NE 688500295
Contact: PEDRO
Phone:
Fax:

Transplace Contact: Ben McCain
Phone: 479-231-3970
Fax:
Email: ben.mccain@transplace.com

Order

Order: 1089886

Temp: Min: Max:

Temp Note:

Hazmat: N

Hazmat UN Code:

Commodity: Plastic Bags (Class 60) NONSTACK - PCF 1

Weight: 26,708

Pieces: 176

Trailer: V

PU 1

TRANSCONTINENTAL TULSA
905 VERDIGRIS PKWY
CATOOSA OK 74015
918-739-4907

Date: 10/29/2021 1100
10/29/2021 1500
Weight: 26,708
Cases: 176

SO 2

LINCOLN PREMIUM POULTRY
1325 E CLOVERLY RD
FREMONT NE 68025
402-720-4686

Date: 11/01/2021 0800
11/01/2021 1700
Weight: 26,708
Cases: 176

Comment:	PU 1	TOTAL DISTANCE = 461 MI
Comment:	PU 1	DLVR 10/29 FRIDAY, FCFS, 8-5
Comment:	PU 1	Equip#: 000000 EDI Equip Type: TV Equip Desc: 53 FT DRYVAN
Comment:	PU 1	LIVELOAD
Comment:	PU 1	LTL 1pm to 3pm -- TL 11am to 3pm -- DO NOT DOUBLE STACK SKIDS
Comment:	PU 1	CAUTION: Foodstuff Container. DO NOT ship with poisons, hazmat or aromatic mater
Comment:	PU 1	ial on same vehicle. Trailer MUST be clean, free of damage and strong odors, and
Comment:	PU 1	must be sealed for Truckload and locked for LTL (seal number on paperwork
Comment:	PU 1	PLEASE MAKE SURE TRAILER IS COMPLETELY CLEAN BEFORE ARRIVING ONSITE!! DO NOT WAIT
Comment:	PU 1	TO CLEAN TRAILER ONSITE AT PICKUP!!!!
Comment:	PU 1	Contact: JOHN LEWMAN - TE918-739-4907
Comment:	PU 1	Contact: JOHN LEWMAN - EMJOHN.LEWMAN@TC.TC
Comment:	SO 2	NO DELIVERY APPT REQUIRED - RECEIVING FCFS 8am-5pm

Comment: SO 2 Contact: Mike Gunderson - TE402-720-4686

Payment:	Carrier Freight Linehaul	\$1,600.00
	Total Carrier Pay	\$1,600.00

Agreement

ALL REQUESTS FOR DETENTION AND LUMPERS MUST BE SUBMITTED (to Transplace contact at top of rate confirmation) WITH PROPER SUPPORTING DOCUMENTATION WITHIN 24 HOURS OF DELIVERY OR REQUESTS ARE SUBJECT TO DENIAL.

BILLING INSTRUCTIONS: THE ORDER NUMBER MUST BE REFERENCED ON YOUR INVOICE FOR PROMPT PAYMENT.

SEND THIS CONFIRMATION, YOUR INVOICE, AND ALL POD DOCUMENTS TO APSHARED@TRANSPLACE.COM. PAYABLES INQUIRES: PAYSTATUS@TRANSPLACE.COM

Transplace Texas, LP ("Broker" or "Transplace") and the transportation service provider ("Contractor") have entered or will enter into one or more written agreements pursuant to which Contractor will provide transportation related services for Transplace and its customers. Transplace and Contractor have agreed that the above compensation shall apply to the shipment listed on this Rate Confirmation and that it shall supersede any prior rate confirmation or agreement and that any rates, terms or conditions of any bill of lading, Conditions of Carriage, Carta de Porte, delivery receipt, Rules Circular, tariff or other document are hereby expressly altered or waived. Unless noted otherwise, all sums are stated and shall be paid in USD. Changes made by Contractor to the rates and/or terms listed herein, including this provision, are null and void. Contractor's physical acceptance of the shipment affirms Contractor's agreement with the stated rate. Transplace's agreement to changes can only be evidenced by a clean Rate Confirmation. Contractor must advise Transplace via a verifiable method of approved additional charges within 24 hours after delivery. Failure to do so may result in inability of Transplace to collect the charges, so payment shall be at the sole discretion of Transplace. Charges not invoiced within 180 days of delivery will be deemed waived. Unless stated otherwise above, linehaul rate includes Fuel surcharge. Subcontracting of this shipment by Contractor may result in forfeiture of Contractor's right to payment.

Any loads moving into, out of, or through the state of California must be moved on a California Air Resources Board compliant truck and trailer.

\$4 per \$900 Comcheck fee

Must accept MacroPoint tracking or subject to \$100 deduction

Date:
Carrier Representative Name:
Carrier Representative Signature:
Driver Name and Phone Number:
Truck Number | Trailer Number:

10/29/2021

Pedro Starcevic

ahmed (678) 899-0424

604/609

Pedro Starcevic