

Carrier Information:**FitzMark Indianapolis**

Carrier: **DUBAI EXPRESS HAUL LLC - NE**
 MC#: 1100230
 Attention: Mark
 Equipment: Van
 Phone: (612) 466-3841

950 Dorman St
 Indianapolis, IN 46202
 Tel: (317) 475-0960 Ext:111
 Fax: (317) 813-3920
 After-Hours: (317) 475-0960
 Andrew Hutcheson

Pick-up Date: 12/4/2020 15:00

Special Instructions:

Customer Notes :

THIS LOAD REQUIRES DRIVER'S CELL PHONE NUMBER FOR MACROPOINT TRACKING. TRAILER MUST HAVE 53" SWING DOORS BE CLEAN, DRY, NO HOLES, NO LEAKS, NO BROKEN BOARDS, SWEEPED OUT BEFORE ARRIVING, NO SWEEPING ON SITE, KICK BOARDS MUST BE FLUSH WITH THE WALL – BASICALLY GOOD, CLEAN EQUIPMENT. In order to qualify for detention, the carrier must be on time for their appt & a pre-detention notification must be sent 30 minutes in advance. For any accessorial charges to be reimbursed we need to be notified within 48 hours of occurrence. We require that your shipment be secured with a load lock or strap to prevent shifting of the load during transit.

**Load Confirmation**

DISP #: 707380

PRO#: 662501	Commodity: FOOD OF ALL KINDS		
28 Pallets	13,500.0 lbs.	53.00 x 0.00 x 0.00	
Shipper: Burrows Paper Corp - OH 335 S Pioneer Blvd SPRINGBORO, OH 45066	Ship Ref#: 11369693 / PO# 10059897OP		
Pickup Date: Dec 04, 2020	Shipping Hours: 15:00 15:00 APPT		
Consignee: MCLANE STURTEVANT 1906 GRANDVIEW PKWY STURTEVANT, WI 53177	Cons Ref#: 11369693 / PO# 10059897OP		
Delivery Date: Dec 05, 2020	Consignee Hours: 05:30 05:30 APPT		

This agreement is subject to the terms of the carrier agreement previously executed between our companies

1. Driver must arrive with a clean, dry, hole-free trailer – or be subject to refusal.
2. Driver MUST call when loaded at pickup location and empty with verbal proof of delivery.
3. Driver is responsible for confirming the safe and appropriate loading of freight on their trailer. If freight is loaded in such a way that damage might be incurred, it is the driver's responsibility to have the shipper rework the product.
4. Carrier is responsible for verifying load/skid count and temperature for all shipments. Discrepancies must be noted and reported back to FitzMark immediately.
5. Delivery date and times are contractual. If driver is unable to adhere to the aforementioned appointment times or if delays are expected that may hinder an on-time delivery, driver must notify FitzMark immediately prior to appointment times or could incur a pay deduction or be subject to the location's redelivery fee.
6. Signed confirmation, signed original Bill of Lading, invoice, lumper receipt and all other supporting documentation must be sent with or before the POD before payment will be made.
7. Carrier is responsible for all freight and accessorial charges not sent within 10 days (or accessorial charges sent after the POD).
8. Detention must be notified before it starts; must have times in/out & signature on POD and be accompanied by a FitzMark detention form within 24 hours of occurrence.
9. If you require FitzMark to cut a T-Chek for you for any reason, there will be a \$15 processing fee. Lumper must be authorized by FitzMark, receipt must have the lumper's name.
10. Failure to accept & utilize MacroPoint can be subject to fine or cancellation of the load.
11. Freight is to be run dedicated with no additional unauthorized freight or consolidation unless specifically noted as "Partial" or "LTL" on this rate confirmation.
12. Carrier must comply with the FDA's Food Safety Modernization Act on regulated moves.
13. This rate is inclusive of all charges.
14. Payment terms are net 30 days.

By signing, I acknowledge that I have read and understand the terms and conditions that FitzMark Indianapolis has set forth on this contract. I also understand that failure to adhere to these terms and conditions may result in a rate reduction at the discretion of FitzMark Indianapolis.

Type	Units	Rate	Subtotal
Line Haul	1.00	950.00	950.00

USD Total (All Inclusive Rate - INCL FUEL SURCHARGES)

\$ 950.00

Signature: _____ **Name:** _____ **Date:** _____



Load Confirmation

DISP #:

707380

Driver's Name: _____

Tractor #: _____

Driver's Cell #: _____

Trailer #: _____

Please sign & send back the attached load confirmation including driver, truck, and trailer info to ahutcheson@fitzmark.com. For questions please call back to Andrew Hutcheson at (317) 981-1320 ext: 111. We expect 100% MacroPoint compliance. If you send out a truck list, please add equipment@fitzmark.com.

ASK ABOUT OUR - QUICK PAY FOR 3% - DIRECT DEPOSIT AVAILABLE! CONTACT ACCOUNTING@FITZMARK.COM