

HOUSEHOLD GOODS BILL OF LADING

DATE OF MOVE _____

DELIVERY DATE _____

This bill of lading establishes a contract between customer and _____ the household goods carrier. It confirms instructions and authorizes the carrier to pack, move, store, and/or perform services shown. This contract is subject to conditions on the back of this form.

CUSTOMER _____ PHONE _____

ORIGIN	DESTINATION
STREET _____ # _____	STREET _____ # _____
CITY, STATE, ZIP _____	CITY, STATE, ZIP _____
ADDL PICK-UP _____	ADDL DROP-OFF _____

DECLARATION OF VALUE: Declared value of \$0.60 per pound per article. This basic insurance option is included in the moving rate.

Exclusions: Furniture composed of particle-board or pressed wood. Items found broken in boxes not packed by _____ Mechanical condition of electronic, audio/video, computer in transit or storage. Previously damaged or repaired items. Any loose items not boxed.

CUSTOMER RELEASE: I have read and understand this contract. I understands that _____ is on the clock upon arrival at origin, through the load, through the drive to destination, and through the unload, until truck is fully reassembled, billed in 15-minute increments if job is based on hourly rates. I agree to pay upon delivery the amount set forth below in cash, money order, certified check, or credit card (credit card payments are subject to additional charge of 3%). I agree to pay for any parking fees or tickets assessed to the carrier for any vehicle under hire by the customer at the time of the charge.

CUSTOMER'S SIGNATURE AT ORIGIN _____ DATE _____

TRANSPORTATION RATES				SUPPLIES / ADDITIONAL CHARGES			
START TIME _____ AM PM	END TIME _____ AM PM	START TIME _____ AM PM	END TIME _____ AM PM	ITEM	AMT.	RATE	AMOUNT
TIME FROM/TO HQ _____ (½ hr min) TIME OFF _____				ROLL OF TAPE		\$ 3.50	
TOTAL HOURS _____ (2 hrs min)				SHRINK-WRAP (per ¼ of roll)		\$ 10.00	
CREW OF #	RATE	# OF HOURS	CHARGES	MATTRESS COVER		\$ 5.00	
			\$	SMALL "BOOK" BOX		\$ 3.00	
			\$	MEDIUM "LINEN" BOX		\$ 4.00	
				LARGE / DISH PACK BOX		\$ 7.00	
				WARDROBE BOX (rent: \$10)		\$ 15.00	
				PICTURE / MIRROR BOX		\$ 6.00	
				PACKING PAPER (per ¼ of bundle)		\$ 10.00	
				HOISTING FEE (item x flight)		\$ 20.00	
				TOTAL SUPPLIES CHARGES		\$	
				STORAGE FEE \$ _____ FOR : _____ months		\$	
				HOURLY / FLAT RATE CHARGES		\$	
				ADDITIONAL LABOR		\$	
				OTHER CHARGES		\$	
				TOTAL CHARGES		\$	
				LESS DEPOSIT / DISCOUNT RECEIVED		(\$ _____)	
				BALANCE DUE		\$	

CREDIT CARD INFORMATION
CARDHOLDER NAME: _____
CARD NUMBER: XXXX - XXXX - XXXX - _____
EXPIRATION: _____ CVC _____ ZIP _____
*credit card payments are subject to additional charge of 3% _____
I AGREE TO PAY THE TOTAL AMOUNT \$ _____
AUTHORIZATION SIGNATURE _____

☐ Cash ☐ Check # _____

I have inspected my goods and premises, including but not limited to elevators, floors, walls and stairwells. All goods received in good condition. There is no loss or damage except as noted in comments here under. The cab and the back of the moving truck are empty and job is completed.

CUSTOMER _____ SIGNATURE AT DESTINATION _____ CARRIER _____ SIGNATURE AT DESTINATION _____

CUSTOMER COMMENTS: _____