



Questions? Please call
(800) 526-0207 or visit
www.mynvc.com

POD
CB

NVC Pro #
1684357

File # **1684357**

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SHIPPER			ACCOUNT INFORMATION		CONSIGNEE	
ICON HEALTH AND FITNESS - LOGAN, UT			ICON HEALTH AND FITNESS Shipper B/L #: 80725863 Order #: 725863 PO #: 0000444957 RA #: 797556690		MELANIE SANDERS 2735 W 3600 S WESTON, ID 83286 208-747-3018	
LTL Carrier: 435234 42014000000 LTL Pro #: 797556690 DP: 226542 42016181530						
Pieces	Manufacturer	SKU	LxWxH	Description	Weight	
1	ICON FITNESS	24928	83x42x33	TREADMILL	400	
1	Total				400	

Harmon Service Failure

Did not Fill out

Description of Services Performed: **Curbside Delivery**

☐ Inside Delivery ☐ Room of Choice ☐ Unpack / Debris Removal / Basic Setup ☐ Assembly ☐ Connect Cable/DVD/VCR

Special Instructions:

Delivery Details: Start Time _____ End Time _____ # of Men _____ Stair Carry: # of Flights: _____ Room: _____

Check One: ☐ Delivery Completed ☐ Delivery Refused

text@nvclogistics.com **red4357d** **red4357r**

Exception Notes: _____

CONSIGNEE -- FOR YOUR PROTECTION, PLEASE READ BEFORE SIGNING:

Please inspect your product(s) and residence upon completion of delivery. By signing below, you agree that: 1.) the delivery team has fully performed the services described above; 2.) the product(s) are in satisfactory condition and there is no damage to the product(s) or your residence. Any exceptions (ex. Damage) must be noted in writing in the "Exception Notes" area above.

Consignee Signature: [Signature] Print Name: _____ Date: _____

Driver Signature: [Signature] Print Name: Don Harmon Date: _____

*** Attention Delivery Team: Within 24-hours, please send POD to NVC via fax or email ***
*** Toll Free Fax Line: (800) 799-1635 - Email: POD@NVCLogistics.com ***

1/14/15

Doc: BOL-7 Ver: 2.10 12/3/2004

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