



NVC
Logistics Group

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

POD
TD

NVC Pro #
1647490

File # **1647490**

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SHIPPER ICON HEALTH AND FITNESS - OGDEN, UT		ACCOUNT INFORMATION ICON HEALTH AND FITNESS Shipper B/L # 80677777 Order # 677777 PO # 0000423571 RA # 442853714		CONSIGNEE JASON HADLEY 1039 E BRETONWOODS LN OREM, UT 84097 801-380-0262	
LTL Carrier: 435234 419790000000 LTL Pro #: 442853714 419810000000 DP: 226542 41983103906					
Pieces	Manufacturer	SKU	LxWxH	Description	Weight
1	ICON FITNESS	NTL12212		FITNESS EQUIPMENT	283
1	Total				283

AFANASAGA Service Failure
Lavana
Did Not Fill out/sign POD

Description of Services Performed: **Threshold Delivery**

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

Special Instructions: Deliver inside any first floor entryway of consignee's residence

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

Check One: ☐ Delivery Completed ☐ Delivery Refused

text@nvclogistics.com **red7490d** **red7490r**

Exception Notes: _____

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

Please inspect your carton(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 carton(s) are in satisfactory condition and there is no damage to the carton(s) or your residence. Any exceptions (ex. Damage) must be noted in writing in the "Exception Notes" area above.

Consignee Signature: *[Signature]* Print Name: **DALE HADLEY** Date: _____

Driver Signature: *[Signature]* Print Name: **SF** 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 ***

12/12/14

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

12-11 ②