NVC Logistics Group

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

POD TD

NVC Pro # **1642215**

File # **1642215**

SHIPPER	ACCOUNT INFORMATION	CONSIGNEE
ICON HEALTH AND FITNESS - BEAUMONT, CA	ICON HEALTH AND FITNESS Shipper B/L #: 115630142 Order #: 1190-CC PO #: 00847008318133 RA #: 415890160	WENDY KWAN 3729 S DYCE CV SALT LAKE CITY, UT 84115 801-897-8998
LTL Carrier: 435234 41980000000 LTL Pro #: 415890160 41976000000 DP: 226542 41983122707		

Pieces	Manufacturer	SKU	LxWxH	Description	Weight
1	ICON FITNESS	PFTL71013		FITNESS EQUIPMENT	190
1	Total			Total	190

Service Failure

Driver Did not sign/fill out PoD

Laloula Sofelo

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 red2215d red2215r

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: _____ Print Name: Wenson Kwan Date: 12/16/14

Driver Signature: _____ Print Name: _____ Date: _____

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

*** 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