REDMAN VAN & STORAGE CO.

2571 West 2590 South, Salt Lake City, Utah (801) 972-4420 855 South 500 West, Salt Lake City, Utah (801) 328-8581
E-16 Freeport Center, Clearfield, Utah (801) 776-2645

287849 10 | 22 287849

TIME STARTED

TIME

DATE	TIME ORDERED		C.O.D.	CHARGE	PER	ORDER TAKEN BY	ORDER DATE	EST. COST	NO. ROOMS
10-03-14	10-2	AT		CHRG		MARGENE	09-24-14		1

INSURANCE	FLIGHT/STAIRS	PACKING	RANGE	REFRIG.	AUTO WASHER	AUTO DRYER	PIANO	FREEZER	EST. WEIGHT
REG									200

SHIP FROM
REDMAN VAN & STG MAIN OFFICE
2571 W. 2590 SOUTH
SALT LAKE CITY, 84119

ATTN: PHONE: 972-4420

SHIP TO
04287
REECE MADISON
35 WEST BROADWAY #503
SALT LAKE CITY, UTAH 84101

ATTN: REECE Bobtail PHONE: 801-310-~~8090~~ 8809

STORAGE LOT # | ALL OUT | TYPE: 30 ulb | EQUIPMENT NO.: EITHER | NUMBER OF PERSONNEL: 2

BILL TO
TECH TRANS
12149

EST.	PACK	NO. DEL	NEW / USED	NAME	TIME IN	TIME OUT
	DRUM			THANAVER		
	1.5					
	3.0			CHAVEZ		
	4.5					
	6.0					
	MIRROR					
	W. ROBE					
	TAPE					
	SNGL.					
	DBL.					
	KING QUEEN					
TOTAL PACKING						

SPECIAL INSTRUCTIONS:

TECH TRANS INSIDE DELIVERY
PLACE, UNPACK AND REMOVE DEBRIS
DRIVER FILL OUT ALL AREAS ON POD
MARKED IN BLUE -- HAVE CUSTOMER
FILL OUT ALL AREAS MARKED IN YELLOW

Service Failure Paper work not signed

★ ★ IMPORTANT LIABILITY INFORMATION ★ ★

THE RESPONSIBILITY OF THIS COMPANY FOR ANY PIECE PACKAGE OR ITS CONTENTS IS LIMITED TO 60 (SIXTY) CENTS PER POUND PER ARTICLE. A HIGHER VALUE MAY BE DECLARED BELOW AND A HIGHER RATE FOR ADDITIONAL PROTECTION WILL BE ASSESSED. FAILURE TO DECLARE HIGHER VALUE ASSUMES 60¢ PER LB. LIABILITY.

SHIPMENT IS RELEASED AT 60¢ PER POUND X _____ CUSTOMER SIG.

DECLARED VALUE IS GREATER THAN 60¢ PER POUND.

CUSTOMER REQUESTS:

NOTE: ADDITIONAL PREMIUM MUST BE PAID TO COVER A HIGHER VALUE DECLARED. AMOUNTS DECLARED WITHOUT PREMIUM PAYMENT WILL BE INVALID.

DEPRECIATED VALUE PROTECTION FOR $ _____

REPLACEMENT COST PROTECTION FOR $ _____

DECLARED VALUE MUST EQUAL COST OF ENTIRE SHIPMENT

CUSTOMER SIGNATURE X _____

PRINT NAME Reese Madsen

GOODS RECEIVED IN GOOD CONDITION EXCEPT AS NOTED. CUSTOMER SIGNATURE ACKNOWLEDGES TERMS AND CONDITIONS ON REVERSE SIDE.

TIME ARRIVED	CUST. INITIAL
4:20 A.M. P.M.	RM
TIME DEPART	**CUST. INITIAL**
4:30 A.M. P.M.	RM

NON PRODUCTIVE TIME (DRIVER MUST EXPLAIN)

COMPUTATION OF CHARGES	NO. OF MEN	REG. HRS.	O.T. HOURS	REG. RATE PER HOUR	O.T. RATE PER HOUR	Totals
MAN & VAN	Delivery					50.00
EXTRA MEN						
PACKING COSTS						
ADDITIONAL PROTECTION CHARGES						
STORAGE CHARGES (PER _____)						
OTHER (PLEASE EXPLAIN)						10.00
					TOTAL COST	60.00

TERMS ARE PREPAID OR UPON COMPLETION OF MOVE. CREDIT ARRANGEMENTS MUST BE APPROVED IN ADVANCE. CREDIT TERMS ARE NET 7 DAYS OF RECEIPT OF INVOICE. INTEREST WILL BE BILLED AT 1½% PER MONTH ON PAST DUE ACCOUNTS. IN THE EVENT LEGAL ACTION IS NECESSARY TO COLLECT PAST DUE AMOUNTS, CUSTOMER AGREES TO PAY ATTORNEY FEES, INTEREST AND COLLECTION COSTS.

Technical Transportation, Inc.

1701 WEST NORTHWEST HIGHWAY
SUITE 220
GRAPEVINE, TX 76051
(866) 260-0360 Fax:(817) 421-0146

Delivery Checklist

TechTrans Waybill: 12149

Pieces: 1 Weight: 200

DRIVER'S ACKNOWLEDGEMENT

I have the following equipment on my vehicle for this delivery:

- ☐ Liftgate, Pallet Jack, 2/4 Wheel Dolly
- ☐ Were stairs utilized for the delivery? Y N If yes, how many? _____ interior _____ exterior
- ☐ All tools necessary to uncrate or unbox
- ☐ I have confirmed all HAWB's and pieces and weights
- ☐ I was able to reach site contact as indicated on Delivery Information Worksheet
- ☐ All equipment was unpacked at end user's designated area
- ☐ Did end user require assembly of product? _____
- ☐ I did not ask for or accept any physical assistance from end user during unloading, unpacking, or debris removal _____

Driver Signature: **Date:**

CUSTOMER ACKNOWLEDGEMENT

Consignee Name: REECE MADISON

IF YOU HAVE ANY PROBLEMS OR QUESTIONS WITH YOUR DELIVERY, PLEASE CONTACT TECHNICAL TRANSPORTATION. BE SURE YOU HAVE ACCOUNTED FOR ALL PIECES. YOUR SIGNATURE CONSTITUTES RECEIPT OF ALL ITEMS. NOTE ANY DISCREPANCIES IN THE COMMENTS SECTION BELOW

(NOTE: ADDITIONAL FEES MAY APPLY FOR CUSTOMER REQUEST(s) FROM THE BELOW LIST, THESE CHARGES WILL BE BILLED BY WISTERIA AND PAYABLE ONLY TO WISTERIA)

(Yes) No Was a verbal notification of shipment performed by the delivery crew?

(Yes) No Did your delivery location have stairs where the item(s) had to be delivered to a room either above or below ground level? If so, how many? _____ interior _____ exterior

Elevator

(Additional fees will apply see www.wisteria.com for details)

(Yes) No Did delivering crew provide two people and proper equipment to make delivery?

(Yes) No Did delivering carrier unpack and remove debris?

Yes (No) Did you request assembly? _____

RM By initialing here, I understand that unpacking is part of the service, but I do not require unpacking. (DO NOT PAY DELIVERY COMPANY FOR THIS SERVICE)

(Yes) No Received complete and in good order. Delivery was made to my satisfaction.

(Yes) No Did your delivery require any of these services? PLEASE CHECK SERVICE(S) THAT APPLY :

(Additional fees will apply see www.wisteria.com for details)

( ) Weekend Delivery,
( ) Change Delivery Address
( ) Missed Appointment

Comments:

Arrival Time: 4:30

Departure Time: 4:35

Signature

Reece Madison

Print Name