

## REDMAN VAN & STORAGE CO.

10	TIME	START	ED	100
				100

287849 10 2571 West 2590 South, Salt Lake City, Utah (801) 972-4420 85 E-16 Freeport Center, Clearfield, Ut	55 South 500 West, (dah (801) 776-2645	Salt Lake City, Uta	h (801) 328-8581 287849		TIME
10 00 14 ID CO.O.D. CHARGE PER	ORDER TAKE	N BY	RDER DATE	EST. COST	NO. ROOMS
10-03-14   10-4 AT CHRG	MARGEN	E 09	-24-14		1
INSURANCE FLIGHT/STAIRS PACKING RANGE REFRIG. A	AUTO WASHER	AUTO DRYER	PIANO	FREEZER	EST, WEIGHT
REG					Loi. WEIGHT
REDMAN VAN & STG MAIN OFFICE					200
MEDIAN VAN & SIG MAIN OFFICE	REI	ECE MAD	ISON	E)	4287
SHIP 2571 W. 2590 SOUTH	SHIP 35	WEST BI	ISON ROADWAY 7	#503 <sup>*</sup>	160)
	TO				
SALT LAKE CITY, 84119	SAL	TIAKE	CITY, UT	ΓΛU 9/101	
ATTN: OTT THOME 4.00	- <del>-</del>		0111, 01	AN 04101	8809
972 <sup>H-</sup> 4 <sup>E</sup> 420	REECE		Bohta	1) 801	~310-8090
STORAGE ALL TYPE  LOT # OUT	೦೮	ulh	EQUIPMENT N	O. NUME	BER OF PERSONNEL
TECH TRANS	18.57				
12149	EST. PACK	DEL	USED	NAME	IN OUT
BILL	1.5	THAN	eil		
10	3.0	chayez			
	4.5				
	6.0				
SPECIAL INSTRUCTIONS:	W. ROBE			0	
TECH_TRANS INSIDE DELIVERY	TAPE			No.	
PLACE, UNPACK AND REMOVE DEBRIS	SNGL.			D-FL	
UKIVER FILL OUT ALL AREAS ON POD	DBL.			Fari	
MAKKED IN BLUE HAVE CUSTOMER	KING QUEEN			4,/	C
FILL OUT ALL AREAS MARKED IN YELLOW		-1,	100	. //.	7

## \* \* 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 COV-ER 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** 

> TIME CUST. ARRIVED INITIAL 1:20 P.M. TIME CUST. DEPART INITIAL A.M.

NON PRODUCTIVE TIME (DRIVER MUST EVEL AIN)	NON	PRODU	CTIVE	TIME	(DRI)	/ED	инст	EVDI	ALALA
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TOTAL PACKING

NON PRODU	CTIVE TIME (DRIVER MUST EXPLAIN	1)
COMPUTATION OF CHARGES	NO. OF REG. O.T. REG. RATE O.T. RAT MEN HRS. HOURS PER HOUR PER HOU	F
MAN & VAN	Delivery	50.00
EXTRA MEN		
PACKING COS	STS	
ADDITIONAL	PROTECTION CHARGES	
STORAGE CH	IARGES (PER )	
OTHER (PLEA	ASE 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 11/2% 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.

CUSTOMER SIGNATURE >

Madis Kerse PRINT NAME \_

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

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

## **Delivery Checklist**

TechTrans Waybill: 12149

	W.E.	
Pieces:	Weight:	200
	S 3	200

	DRIVER'S ACKNOWLEDGEMENT
I have t	ne following equipment on my vehicle for this delivery:
	iffgate, Pallet Jack, 2/4 Wheel Dolly
	Vere stairs utilized for the delivery? Y N If yes, how many? interior exterior
	, and or dipox
	have confirmed all HAWB's and pieces and weights
	was able to reach site contact as indicated on Delivery Information Workshoot
	in equipment was unpacked at end user's designated area
Di	id end user require assembly of product?
or	did not ask for or accept any physical assistance from end user during unloading, unpacking,
Driver Sig	gnature: Date:
Consignas	CUSTOMER ACKNOWLEDGEMENT
Consignee	Name: REECE MADISON
TRANSPOR	AVE ANY PROBLEMS OR QUESTIONS WITH YOUR DELIVERY, PLEASE CONTACT TECHNICAL
COMPHIO	TES RECEIPT OF ALL ITEMS, NOTE ANY DISCREPANCIES TOOK SIGNATURE
(NOTE:	ADDITIONAL FEES MAY APPLY FOR CUSTOMER REQUEST(s) FROM THE BELOW LIST, THESE CHARGES WILL BE BILLED BY WISTERIA AND PAYABLE ONLY TO THE BELOW LIST,
Alaskin.	THE TENDER AND PATABLE UNLY TO WISTERIAL
163 MD	Was a verbal notification of shipment performed by the delicery and
Mas My	Did your delivery incation have stairs where the item ().
Elevator	
Yes No	(Additional fees will apply see www.wisteria.com for details)
Yes No	Did delivering crew provide two people and proper equipment to make delivery?  Did delivering carrier unpack and remove debris?
Yes No	Did you request assembly?
	By initialing here, I understand that unpacking is next of the
KN	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)
res 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
	Reese Madis Departure Time: 4:35
Signature <	
7.14.416	Print Name