



REDMAN VAN & STORAGE Co.

TIME STARTED

2:35

TIME

289147

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

289147

DATE 10-20-14	TIME ORDERED 1-5 AT	C.O.D.	CHARGE CHRG	PER	ORDER TAKEN BY MARGENE	ORDER DATE 10-15-14	EST. COST	NO. ROOMS 1	
INSURANCE	FLIGHT/STAIRS	PACKING	RANGE	REFRIG.	AUTO WASHER	AUTO DRYER	PIANO	FREEZER	EST. WEIGHT 208
REG									

REDMAN VAN & STG MAIN OFFICE

SHIP FROM

2571 W. 2590 SOUTH

SALT LAKE CITY, 84119

SHIP TO

NANCY MADSEN
1115 EAST 230 NORTH

LINDON, UTAH 84042

ATTN:

972-4420

NANCY

801-899-2072

STORAGE
LOT #ALL
OUT

TYPE

EQUIPMENT NO.
EITHERNUMBER OF PERSONNEL
2NVC
1599712

BILL TO

EST.	PACK	NO. DEF	NEW	USED	NAME	IN	TIME	OUT
	DRUM							
	1.5				Paul			
	3.0				LEONA			
	4.5							
	6.0							
	MIRROR							
	W. ROBE							
	TAPE							
	SNGL.							
	DBL.							
	KING QUEEN							

SPECIAL INSTRUCTIONS:

NVC THRESHOLD DELIVERY
DELIVER TO FIRST FLOOR ENTRYWAY
DO NOT UNPACK
DRIVER FILL OUT ALL AREAS ON POD
MARKED IN BLUE -- HAVE CUSTOMER
SIGN AND DATE AREA MARKED IN YELLOW

TOTAL PACKING

★ ★ 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 ☒ CUSTOMER SIG.

DECLARED VALUE IS GREATER THAN 60¢ PER POUND.

CUSTOMER REQUESTS:

DEPRECIATED VALUE
PROTECTION FOR \$REPLACEMENT COST
PROTECTION FOR \$DECLARED VALUE MUST EQUAL COST OF
ENTIRE SHIPMENT

NOTE:

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

CUSTOMER
SIGNATURE

PRINT NAME

NANCY MADSEN

TIME ARRIVED 8:55 AM	CUST. INITIAL LM
TIME DEPART 3:01 PM	CUST. INITIAL LM

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						50.00
EXTRA MEN						
PACKING COSTS						
ADDITIONAL PROTECTION CHARGES						
STORAGE CHARGES (PER)						
OTHER (PLEASE EXPLAIN)						
						8.56
						TOTAL COST 58.50

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 1 1/2% 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.



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

POD
TD

NVC Pro #
1599712

File # 1599712

Page 1 of 1

SHIPPER			ACCOUNT INFORMATION		CONSIGNEE	
ICON HEALTH AND FITNESS - SAVANNAH, GA			UPS - ICON		NANCY MADSEN	
LTL Carrier: 435234 41917000000			Shipper B/L #: 115525585		1115 E 230 N	
LTL Pro #: 855051665 41927000000			Order #: 897306-CC		LINDON, UT 84042	
DP: 226542 41924153603			PO #: 00847007039995		801-899-2072	
RA #: 855051665						
Pieces	Manufacturer	SKU	LxWxH	Description	Weight	
1	ICON FITNESS	PFTL70012		TREADMILL	208	
1	Total				208	

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 red9712d red9712r

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: Nancy Madsen Print Name: nancy madsen Date: 10/24/14

Driver Signature: _____ Print Name: _____ 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 ***

10/14/14

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