

REQUEST for FREIGHT QUOTE

TODAY'S DATE	REQUESTED SHIP DATE	REQUESTED DELIVERY DATE

PICKUP/DELIVERY INFORMATION

FROM SENDER	TO RECIPIENT
Name:	Name:
Company:	Company:
Address:	Address:
City:	City:
Prov/State:	Prov/State:
Phone:	Phone:
Email:	Email:

PACKAGE DETAILS

Weight:	# of Pkgs:			
Dimensions:	L	W	Н	
	L	W	Н	
Special Instructions or Requirements needed (ie: Lift Gate, Insurance): Yes or No (if yes please explain below)				