

Customs & Transportation Services

PICKUP ADDRESS		
COMPANY NAME _____		
IRS # _____		
ADDRESS _____		
ADDRESS _____		
ADDRESS _____		
CITY _____	STATE PROV _____	ZIP/ POSTAL _____
CONTACT _____		
PHONE # _____	FAX _____	

DELIVERY ADDRESS		
COMPANY NAME _____		
SHOW NAME _____	BOOTH # _____	
FACILITY _____		
ADDRESS _____		
ADDRESS _____		
CITY _____	STATE PROV _____	ZIP/ POSTAL _____
ON SITE CONTACT _____		
CELL PHONE # _____		

BILL TO		
COMPANY NAME _____		
ADDRESS _____		
ADDRESS _____		
CITY _____	STATE PROV _____	ZIP/ POSTAL _____
CONTACT _____		
PHONE # _____	FAX _____	

RETURN FREIGHT		
COMPANY NAME _____		
ADDRESS _____		
ADDRESS _____		
CITY _____	STATE PROV _____	ZIP/ POSTAL _____
CONTACT _____		
PHONE # _____		

TERMS OF PAYMENT AND SECURITY DEPOSIT – MUST BE COMPLETED				
<input type="checkbox"/> VISA	<input type="checkbox"/> MC	<input type="checkbox"/> AMEX	<input type="checkbox"/> CORPORATE CARD	<input type="checkbox"/> PERSONAL CARD
CARD NUMBER _____			EXPIRY DATE _____	
Card Holder _____				
Signature _____			Date _____	
I hereby authorize the use of this credit card for payment of services related to this order form. I understand that declined credit cards are subject to a 30% surcharge.				

SHIPMENT INFORMATION				
Pick Up Date _____	Time _____	Delivery Date _____	Time _____	
TYPE	PIECES	DIMENSIONS (Inches)		WEIGHT (LBS)
Cartons / Boxes	_____	L _____	W _____	H _____
Crates / Fiber Case	_____	L _____	W _____	H _____
Skid / Pallet	_____	L _____	W _____	H _____
Carpet / Other	_____	L _____	W _____	H _____
Total Pieces _____			Total LBS _____	
Requested Service Level	<input type="checkbox"/> AIR	<input type="checkbox"/> 2 ND DAY	<input type="checkbox"/> TRUCK	
Additional Services Required	<input type="checkbox"/> LIFT GATE	<input type="checkbox"/> INSIDE PICKUP / DELIVERY		Carrier Name _____
				(If not using Commerce Logistics)

CARGO INSURANCE / DECLARED VALUE (Only to be completed when using Commerce Logistics)	
The declared value of carriage of this shipment is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged but not less than \$50.00 per shipment UNLESS a value is declared below and applicable charges paid. Subject to the terms and conditions of the liability of the Forwarder for loss/damage stated below. Cargo insurance will not apply or cover any electronic goods. (Additional fees for Cargo Insurance will apply)	
Do you require additional Insurance?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Declared Value	\$ _____

TERMS & CONDITIONS		
<p>This order is placed with the specific understanding that we hereby release Commerce Trade Show Logistics Group Ltd (C.T.S.L.G Ltd) and or agents from all liability for loss, damage and or theft to our merchandise and property, no matter how caused, and we have insured all such properties being handled. 1) C.T.S.L.G Ltd shall not be responsible for damage to uncrated materials, improperly packaged or concealed damage. 2) C.T.S.L.G Ltd will not be responsible for any loss/damage/delay due to fire, acts of god, strikes, lockouts of any kind beyond its control.3) C.T.S.L.G Ltd liability is outlined in the above Cargo Insurance/Declared Value section. Please ensure you are self insured or you must declare a value for carriage and pay the charges applicable for the service. 4) C.T.S.L.G Ltd shall not be liable to any extent whatsoever for the actual, potential or assumed losses or profits or revenues, or for any collateral costs which may result from any loss or damaged to an exhibitors materials which make it impossible or impractical to exhibit same. 5) Each exhibitor is responsible to declare all hazardous materials and abide by all Federal, Provincial, State and local laws.</p>		
I have read and agreed to the Terms and Conditions of this contract with C.T.S.L.G Ltd		
Print Name _____	Signature/Authorization _____	Date _____

