

DESIRED PICKUP DATE:

BROKER:



FAX TO: (320) 558 - 9609

MAIL TO: PO BOX 337, CLEARWATER, MN 55320

CUSTOMER INFORMATION ( Please fill in both FROM & TO )

FROM: Name, Address, City, State, Zip, Phone (H), Phone (W), Phone (C)

TO: Name, Address, City, State, Zip, Phone (H), Phone (W), Phone (C)

LOAD AT:

UNLOAD AT:

Contact & Phone #:

Contact & Phone #:

SPECIAL INSTRUCTIONS & COMMENTS:

VEHICLE INFORMATION

1st VEHICLE INFORMATION: Year, Make, Model, Color, Vehicle ID #, State, Lic. No.

2nd VEHICLE INFORMATION: Year, Make, Model, Color, Vehicle ID #, State, Lic. No.

IMPORTANT INFORMATION:

( NO PERSONAL CHECKS WILL BE ACCEPTED )

- 1. NO Personal items are allowed in the interior of vehicles due to D.O.T. and Insurance restrictions. Cars with personal items WILL NOT be loaded.
2. The vehicle must have 1/4 tank of fuel or less.
3. Cars must be signed for at PICKUP & DELIVERY.

Transport Price

+Fuel Surcharge

\*\*\* TOTAL DUE \$

LESS: DEPOSIT

BALANCE DUE

PRE-PAYMENT by Credit Card, Cashier Check or Money Order made payable to: CONTINENTAL AUTO RELOCATORS, INC.

CREDIT CARD COD/MONEY ORDER/CASHIER CHECK

MASTERCARD VISA AMEX DISCOVER EXPIR. MO/YR

CREDIT CARD NUMBER

Credit card number input boxes

OFFICE USE: CC SEQ#

Please COMPLETE, SIGN and RETURN this form with your DEPOSIT to CONTINENTAL AUTO RELOCATORS

Signature: Date: