

Move Date: _____ Time: _____

Shipper: _____

Phone: _____

Bill of Lading

Invoice # _____

Movers were paid \$ _____

☐ CC ☐ CASH

Sebastian Moving South West Ohio

937-971-0493

8672 US Highway 22 and 3

Sabina OH 45169

As shipper, I acknowledge that I have read & received a copy of the moving agreement/guidelines. I do agree to the terms contained in the moving agreement / guidelines. I understand that there is no obligation by either party until both the Shipper and the Mover sign this contract. Sebastian Moving South West Ohio does not cover internal damage to electronics. The maximum claim for damage to all electronics (including tv's and computers) is \$250.00 per move.

Pick Up Address

Drop Off Address

Job Notes

Extra Stop

Points: _____

Hourly Rate

_____ Man Crew

_____ Trucks

2 Hour Min _____

Addl Hours _____

Oversize Fee _____

Start Time _____

Break _____

Finish Time _____

Total \$ _____

Flat Rate

Pack _____

Move _____

Storage _____

2nd Move _____

Unpack _____

Load _____

Unload _____

Total \$ _____

Packing

B

D

W

P

TV

M

Shipper

Estimated Move Price: _____

Print Name: _____

Signature: x _____

Date: _____

Total Move Price

\$

Card _____ Exp ____/____ CVV2 _____ Zip _____

I authorize the charge of \$ _____

I agree to all charges x _____

Mover

Signature: _____

Date: _____