

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
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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: _____