

		LOGISTICAL SERVICES, LLC	
I HAVE READ, UN	DERSTAND, & ACCEPT THE TE	RMS & CONDITIONS LISTED IN THE PERSONA	ALLY OWNED VEHICLE CONTRACT.
<u>(</u>	Customer Order F	ORM ~ PERSONALLY OWNED V	TEHICLE
CUSTOMER NAM	E		
		CITY	
STATE	ZIP	PRIMARY PHONE	
CELL PHONE		EMAIL	
	Ріск U	P (ORIGIN) INFORMATION	
CONTACT NAME		<u> </u>	
Address		CITY	
STATE:		PRIMARY PHONE	
		EMAIL	
	Derman	(DEGRENARION) INFORMATION	
DELIVERY (DESTINATION) INFORMATION DELIVERY INFORMATION IS THE SAME AS CUSTOMER INFORMATION YES NO			
		CITY	
		PRIMARY PHONE	
		EMAIL ————	
	77 700	IIIGI E TNEODMARION	
VIN NIIMDED (AI	<u>у ел</u> д 17-Digits)	HICLE INFORMATION	
YEAR	MAKE	MODEL_	
Does Vehicle R		OPEN/ENCLOSED CARRIER:	OPEN ENCLOSED
PAYMENT INFORMATION			
CREDIT/D			ECK/MONEY ORDER
CREDIT CARD TYPE \square VISA \square MASTERCARD \square AMERICAN EXPRESS \square DISCOVER			
	VION DESCRIPTION		
EXP. DA	ATE/	_ SEC CODE (3 DIGITS)	
I AUTHORIZE PAYMENT TO BE MADE IN THE AMOUNT OF \$			
MAKE PAYABLE TO EVERGREEN LOGISTICAL SERVICES, & MAIL TO: PO BOX 255 LAKE LEELANAU, MI 49653			
ORDERS CANNOT BE ACTIVATED UNTIL PAYMENT IS RECEIVED!			

Date

Print Name Clearly

Signature