GREAT CANADA LOGISTICS INC



Rate Request Form – Expedited Service

Please fill out this rate request form and e-mail it to the Great Canada Logistics inc team at Greatcanadalogistic.com . Thank you for your request and we will respond as soon as possible.

Date

Personal Information Company: Contact:			Email Address: Telephone Number:		
Freight Location Information Origin Point Address: Prov/State: Postal/Zip:			Shipping Time: Shipping Date:		
Destination Point Address: Prov/State: Postal/Zip:			Receiving Hours: Delivery Date:		
Commodity Information Package Description:					
Commodity: Is the freight skidded: Total Weight: Dimensions (LxWxH):		NO □ / KGS □ ′ CM □	No. of Skids Class Number: UN Number:		
Dangerous Goods: Heated Service Protection: Shipping Appointment Required: Delivery Appointment Required:	YES□/ I	NO	Tailgate Loading: Tailgate Delivery: Residential Non-Commercial:	YES □/ YES □/ YES □/	NO [NO [
Transit Time Requirement for Expedited Service:					
Special Instructions:					