

Transportation Order Form

HAUListic is pleased to be named the OFFICIAL transportation company for:



SHOW LOCATION: _____ **SHOW DATES:** _____ **BOOTH #** _____

PLEASE ARRANGE TRANSPORTATION FOR MY EXHIBIT MATERIALS ☐

RATE INQUIRY ONLY AT THIS TIME ☐

REQUESTER NAME: _____ **REQUESTER PHONE:** _____

PICK UP ADDRESS:

Company Name: _____

Street address: _____

City, State, Zip: _____

Contact name: _____

Phone: _____

BILLING INFORMATION

Company name: _____

DBA: _____

Address: _____

City, State Zip: _____

Phone: _____ Fax: _____

Contact name: _____

Email: _____

Pick up date: _____ Ready time: _____ Close time: _____

Declared value: \$ _____

NO. OF PIECES	DESCRIPTION	DIMENSIONS			WEIGHT
		L	x	W	

SERVICE LEVEL REQUIRED:

☐ 2 DAY (PLEASE INDICATE DELIVERY DATE) _____ ☐ 3-5 DAY DEFERRED (GROUND)

Please arrange shipping after show to the following address

Company: _____

Street address: _____

City, State, Zip: _____

Phone: _____

Contact Name: _____

Providing REAL solutions to your transportation problems!

HAUListic

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