

ORDER FORM: Customs Brokerage & Transportation Services

We wish to use North American Logistics Services for: (Please check one)

Customs Clearance & Transportation Customs Clearance Only Transportation Only

Section 1 - Exhibitor and Event Information

Pick Up Address	***Company name or facility name***			Location Name:	Pickup Date:	Time:	
	Address:	City:	Prov./State:	Postal/Zip:			
	Contact:	Phone #:	Email:	US Tax #/EIN:			
	Applicable only if pickup is from a tradeshow			Exhibitor Name:	Event Name:	Event Date(s):	Booth #:

Delivery Address	***Company name or facility name***			Location Name:	Delivery Date:	Time:	
	Address:	City:	Prov./State:	Postal/Zip:			
	Contact:	Phone #:	Email:	US Tax #/EIN:			
	Applicable only if delivering to a tradeshow			Exhibitor Name:	Event Name:	Event Date(s):	Booth #:

Return freight same as pickup address If same, only complete pickup date/time information Return services not required

Return Freight	***Company name or facility name***			Location Name:	Pickup Date:	Time:	
	Address:	City:	Prov./State:	Postal/Zip:			
	Contact:	Phone #:	Email:	US Tax #/EIN:			
	Applicable only if delivering to another tradeshow			Exhibitor Name:	Event Name:	Event Date(s):	Booth #:

Section 2 - Carrier/ Shipment Information

Name of carrier providing transportation services NALSI Other

Number of Pieces	Dimensions (inches)			Weight (LBS)
Carton/Boxes	L	W	H	
Crates/Fiber Case	L	W	H	
Skid/Pallet	L	W	H	
Carpet/Other	L	W	H	
TOTAL				

Additional Services: Lift Gate Inside Pick Up/Delivery
 53ft trailer accessible? Pickup: Yes No Delivery: Yes No Loading dock available? Pickup: Yes No Delivery: Yes No
 Do you require additional Insurance? Yes No Declared Value: ***for insurance purposes only***

Cargo Insurance (only to be completed when using NALSI Transportation) **Please note additional fee's will apply for insurance coverage**

Section 3 - Terms of Payment and Security Deposit (Must be completed) Invoices are processed electronically and transmitted to email provided.

Send Bill To:	Company Name:	Email 1:		
	Address:	City:	Email 2:	
	Prov./State:	Postal/Zip:	Contact Name:	Phone #:

Credit Card Required for Guarantee Purpose Only.

Visa MasterCard American Express

Cardholder Name: _____ Card Account #: _____ Expiry Date: _____ CVC #: _____

Cardholder's Signature: _____ Email: _____

Payments are due upon receipt of invoice. Invoices are submitted by email to the contact(s) provided or on file from previous transactions. Upon receiving Proforma Invoice (in the case of prepayment of services) OR Final Invoice, you will have the option of paying by one of the following methods:

- Credit Card – Via PayCargo payment portal: <https://paycargo.com/vendors/north-american-logistics-services/> CAD and USD options are available – please select the appropriate account based on your invoice currency
- Interac E-Transfer - nalsipayments@nalsi.com (CAD Funds from Canadian financial institutions only)
- EFT / Wire – Banking information available by responding to the original email that included invoice.
- Cheque – Mail or courier to the address on your invoice

Payment Guarantee:

In order to ensure compensation is received for the services provided, a valid credit card is required prior to confirming your order. A transaction will not be processed unless there is a default on payment and we have had no communication regarding payment arrangements. Additional processing and administration fees will be assessed in the event of default and the guarantee transaction is processed. A 10% administrative surcharge will be assessed to any invoice where the guarantee method is manually processed. This may happen 60 days after invoice date. A \$100.00 collection charge will be assessed to any account forwarded to a collection agency. 2% interest charge may be assessed on invoices over 60 days.