

# MOVING EXPRESS & STORAGE INC.

245 4th STREET SUITE 12, PASSAIC, NJ 07055

MC# 719711 • DOT# 2055103

TELEPHONE: 1-866-255-3535

**\*\*\*THIS FORM IS TO BE COMPLETED BY THE CUSTOMER AT THE PICKUP LOCATION\*\*\***

CONTRACT#: \_\_\_\_\_ DATE OF PICK-UP: \_\_\_/\_\_\_/\_\_\_

CUSTOMER NAME: \_\_\_\_\_

DELIVERY ADDRESS: \_\_\_\_\_

STREET

APT#

CITY

STATE

ZIP CODE

**\*IF YOU HAVE A TEMPORARY ADDRESS WHILE IN STORAGE PLEASE PROVIDE THIS INFORMATION BELOW\***

ADDRESS: \_\_\_\_\_ PHONE#: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

CHECK ONE:  Private House  Apartment Building  Other please explain \_\_\_\_\_

CHECK ONE: Elevator  Yes  No CHECK ONE: Walk up:  Yes  No If yes, # of flights: \_\_\_\_\_

**NOTE:**

IF WALK UP IS MORE THAN ONE FLIGHT - 7 STEPS, AN ADDITIONAL LABOR CHARGE OF \$75 PER FLIGHT WILL BE APPLIED.

IF THERE IS MORE THAN 75FT FROM DOORWAY TO THE TRUCK; A LONG CARRIES CHARGE OF \$75 PER 75FT WILL BE APPLIED.

IN ADDITION IF THERE IS AN ELEVATOR. A ONE-TIME ELEVATOR FEE OF \$50 WILL BE APPLIED.

A WAITING TIME CHARGE IS \$100 PER HOUR. OVERNIGHT CHARGE UP TO \$350 AND FULL DAY WAITING IS \$500 PER DAY.

CONTACT PERSON NAME: \_\_\_\_\_

HOME: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

WORK: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Is there access for a 53" trailer at the delivery address? YES \_\_\_\_\_ NO \_\_\_\_\_

If no access additional charge will be determined for the shuttle service.

Is there any particular day or time that access to your building/house will be denied? YES \_\_\_\_\_ NO \_\_\_\_\_

List restricted time and/or days: \_\_\_\_\_

All deliveries are made on a flexible basis. Please indicate what is the first available date you will be able to accept delivery into your home. We schedule the delivery as best as possible to meet your need. However, the actual arrival is flexible.

THE EARLIEST POSSIBLE DATE THAT I CAN RECEIVE THE SHIPMENT IS: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH DAY YEAR

**\*\*\*DELIVERY CAN TAKE UP TO 21 BUSINESS DAYS FROM THE EARLIEST DATE LISTED ABOVE\*\*\***

A BALANCE OF \$ \_\_\_\_\_ IS DUE UPON DELIVERY.

**TERMS OF PAYMENT ARE:**

CASH, POSTAL MONEY ORDER (FROM THE POST OFFICE), ONLY. PLEASE HAVE YOUR BALANCE READY BEFORE DELIVERY TO PREVENT ANY ADDITIONAL CHARGES.

I HAVE READ THE ABOVE AND AGREE TO THE INFORMATION PROVIDED.

CUSTOMER NAME: \_\_\_\_\_ CUSTOMER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

PLEASE SCHEDULE YOUR DELIVERY  
OR EMAIL US AT [INFO@MOVINGX-PRESS.COM](mailto:INFO@MOVINGX-PRESS.COM)

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 MC# 719711 • DOT# 2055103  
 TELEPHONE: 1-866-255-3535 • FAX: 1-862-899-7450

ORDER NO:
P/U DATE:
1 <sup>ST</sup> DATE AVAILABLE FOR DELIVERY

## PACKING MATERIALS ORDER FORM

SHIPMENT / AGENT NAME

PACKING MATERIAL DESCRIPTION	QTY	ITEM	TOTAL	QTY	PACKING	TOTAL	QTY	UNPACKING HOURLY RATE	TOTAL
BOOK BOX		\$5.00			\$20.00				
DRUM DISH PACK		\$15.00			\$56.00				
LAMP BOX		\$10.00			\$47.00				
LINEN BOX		\$8.00			\$32.00				
MATTRESS/CRIB		\$12.00			\$25.00				
MATTRESS/KING BOX		\$20.00			\$38.00				
MATTRESS/DOUBLE BOX		\$20.00			\$35.00				
MEDIUM CRATE		N/A			\$75.00				
LARGE CRATE		N/A			\$95.00				
WARDROBE BOC + BAR		\$16.50			\$35.00				
PICTURE MIRROR BOX		\$12.00			\$52.00				
T.V. BOX		\$20.00			\$30.00				
BUBBLE WRAP		\$1.00			\$2.00				
SOFA COVER		\$12.00			\$20.00				
WHITE PAPER CARTON		\$20.00			N/A				
OTHER									
<b>SUBTOTAL:</b>			<b>SUBTOTAL:</b>				<b>SUBTOTAL:</b>		

The packing material description reflect the materials used in the packing. The descriptions are not indicative of the items actually packed with the materials as a variety of items may be packed with the indicated materials. Unpacking is not included in the charges and can be purchased at an additional charge. Riddance and disposal of materials used in packing is the responsibility of the shipper. Final determination of materials used cannot be determined until services have been completed. You will be notified of final charges prior to delivery and while in transit. Carrier is authorized to use necessary packing materials. Items packed by shipper may be placed into additional containers to ensure efficient cargo space on the transit vehicle. All charges including additional services will be charged based on the full tariff rates. The undersigned shipper and/or agent has full authority to order services and enter into this agreement.

<b>TOTAL</b>
<b>TAX</b>
<b>GRAND TOTAL</b>

SERVICE	ORIGIN ADDRESS	DESTINATION ADDRESS
ANY EXTRA STOP?	YES/NO	YES/NO
ANY PIANO?	YES/NO	YES/NO
ANY SHUTTLE REQUIRED?	YES/NO	YES/NO
APPLIANCE SERVICING?	YES/NO	YES/NO
LONG CARRY SERVICE?	YES/NO	YES/NO
ELEVATOR OR STAIRS SERVICE?	YES/NO	YES/NO

SHIPPER/AGENT/REPRESENTATIVE:	MOVERS:
X	X
DATE:	DATE:
X	X