Cross-Border Load Confirmation

Carrier Information

Carrier Name
MC Number
Contact Name
Phone
 :
Email
Shipper Information
Shipper Name
Contact
Address
City, State/Province, Zip/Postal Code
Country
•
Consignee Information
Consignee Name
Contact
Address
City, State/Province, Zip/Postal Code

Country
Load Details
Pick-up Date & Time
Fick-up Date & Time
Delivery Date & Time
Commodities
Weight
Trailer Type
Trailer Type
Rate & Payment
Rate
Currency
Payment Terms
On a sight to attraction a
Special Instructions
Broker / 3PL Contact
Company Name
Contact Name
Phone

Email

Signatures

Carrier	Date
Broker / 3PL	Date