



# LANGE

## OFFICIAL SHOW CARRIER LANGE TRANSPORTATION

- ▶ **WE CAN HANDLE CRATED AND UNCRATED SHIPMENTS** - our trucks are equipped with air-ride suspension and complete logistics, to strap and secure your material. We can also blanket wrap your material if required.
- ▶ **PRIORITY MOVE-IN AT THE SHOW** - your material will be delivered early, so when you arrive everything will already be in your booth.
- ▶ **NO OVERTIME CHARGES** for work performed, even for evening and weekend deliveries or show pick-ups.
- ▶ **FLEXIBLE PICK-UP SCHEDULE** - we can pick up goods when you want - call us for details.
- ▶ **A SUPERVISOR AT OUR ON-SITE SERVICE DESK** will be able to deal with any questions that may arise regarding move-in or move-out at the show. We will also provide free shrink wrap, tape, completed bills of lading and shipping labels for all exhibitors that ship with Lange.

A 1-800 number accessible across North America ensures you deal with one office and contact person at all times.

**FOR MORE INFORMATION CONTACT US AT:**

**(905) 362-1290 or 1-800-668-5687**

**or COMPLETE OUR FORM ON THE REVERSE**

# TRANSPORTATION ORDER FORM

**PCT121**

<b>PICK UP INFORMATION</b>	PICK-UP DATE:	PICK-UP TIME:	MAIN INTERSECTION:	CONTACT NAME:
	PICK-UP COMPANY NAME AND ADDRESS:			PHONE #:
				FAX #:
	LOADING DOCK AT PICK-UP: Y      N	TRACTOR TRAILER CAN FIT: Y      N	BLANKETS/STRAPS: Y      N	E-MAIL:
	# OF PIECES:	WEIGHT:	DIMENSIONS:	
SPECIAL INSTRUCTIONS:				

<b>SHOW INFORMATION</b>	PRIMARY CARE TODAY AND ITECH SUMMIT	INTERNATIONAL CENTRE - HALL 5	MAY 10 - 12, 2012
	EXHIBITING COMPANY:	SHOW SITE CONTACT:	BOOTH #:
	MOVE IN DATE:	MOVE IN TIME:	MOVE OUT DATE:

<b>DELIVERY AFTER SHOW</b>	DELIVERY DATE:	MAIN INTERSECTION:	CONTACT NAME:	
	SHIP TO NAME AND ADDRESS:		PHONE #:	
			FAX #:	
	LOADING DOCK AT DELIVERY: Y      N	TRACTOR TRAILER CAN FIT: Y      N	BLANKETS/STRAPS: Y      N	E-MAIL:
	# OF PIECES:	WEIGHT:	DIMENSIONS:	
SPECIAL INSTRUCTIONS:				

**VALUATION COVERAGE -> PLEASE INDICATE A ZERO DOLLAR AMOUNT WITH SIGNATURE IF YOU DO NOT REQUIRE ADDITIONAL VALUATION COVERAGE.**  
 I require valuation coverage on my goods while in the possession of Lange Transportation & Storage Ltd. A claim would be based upon the landed wholesale cost of my goods \$\_\_\_\_\_. The rate for this coverage is 2% of the declared value of the materials being insured (charged separately for move-in and move-out) with a \$20.00 minimum charge each way and a \$50.00 deductible\*. Otherwise, please just use released valuation coverage at no additional cost to me. Released valuation coverage in case of loss, damage etc. is \$0.50 per pound. Maximum released liability cannot exceed \$50.00 per piece count or total shipping charge from origin to destination.

\*Please note for extra valuation, the maximum dollar value we can offer may be capped at \$5.00 per pound (i.e. if your shipment weighs 2,000lbs the maximum extra valuation coverage you can purchase is \$10000.00). You must receive confirmation in writing if you wish to exceed the \$5.00 per pound cap.

**SIGNED:** \_\_\_\_\_ **PRINT:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**CHEQUE ENCLOSED - PAYABLE TO LANGE TRANSPORTATION AND STORAGE LTD.**

MASTERCARD                       VISA

CREDIT CARD NO: \_\_\_\_\_ CARD EXPIRY DATE: MONTH: \_\_\_\_\_ YEAR: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ PRINT: \_\_\_\_\_

**PAYOR NAME AND ADDRESS**

COMPANY: \_\_\_\_\_ PURCHASE ORDER #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

PROV/STATE: \_\_\_\_\_ POSTAL/ZIP CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

ALL CUSTOMERS WITHOUT AN ESTABLISHED ACCOUNT WITH LANGE MUST PREPAY BY CREDIT CARD OR CHEQUE

**CUSTOMER SIGNATURE:** \_\_\_\_\_ **PRINT:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_