

International Freight & Moving Company

ACCEPTANCE FORM

CLIENT	
NAME &	
ADDRESS	
PHONE #	MOBILE
E-MAIL	

We have pleasure in accepting your quotation:-

Number:	Dated:	For: \$
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Preferred Packing Date:	Preferred Uplift Date:
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DESTINATION	
DELIVERY	
ADDRESS	
PHONE #	MOBILE
E-MAIL	

Date you leave NZ:	Date you arrive at Destination:
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INSURANCE COVER:

Please arrange insurance as per attached proposal to the value of
NZ\$ _____ ; at _____ % = \$ _____

OWNERS RISK:

I/We hereby confirm that I/we have declined the offer of insurance, and are fully aware the goods are being carried at owners risk; or that I/we have made arrangements to insure the goods accordingly. Signed by: _____

CUSTOMER ACCEPTANCE

I/We hereby authorise International Freight & Moving Company to arrange our overseas relocation and agree to pay all charges prior to removal date; by cash, cheque or direct credit into ANZ bank account:
06-0493-0494423-00

Name: _____ Signature: _____ Date: _____
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