

Canada

Transport Inc.

Bill of Lading and Motorcycle Transit Inspection Survey

Bill of Lading

Date

<i>Shipper</i>	<i>Receiver</i>
<i>Name</i>	<i>Name</i>
<i>Contact Number</i>	<i>Contact Number</i>
<i>Pick-up Location</i>	<i>Drop Off Location</i>
<i>Contact Name</i>	<i>Contact Name</i>
<i>Contact Number</i>	<i>Contact Number</i>
<i>Address</i>	<i>Address:</i>

Details:

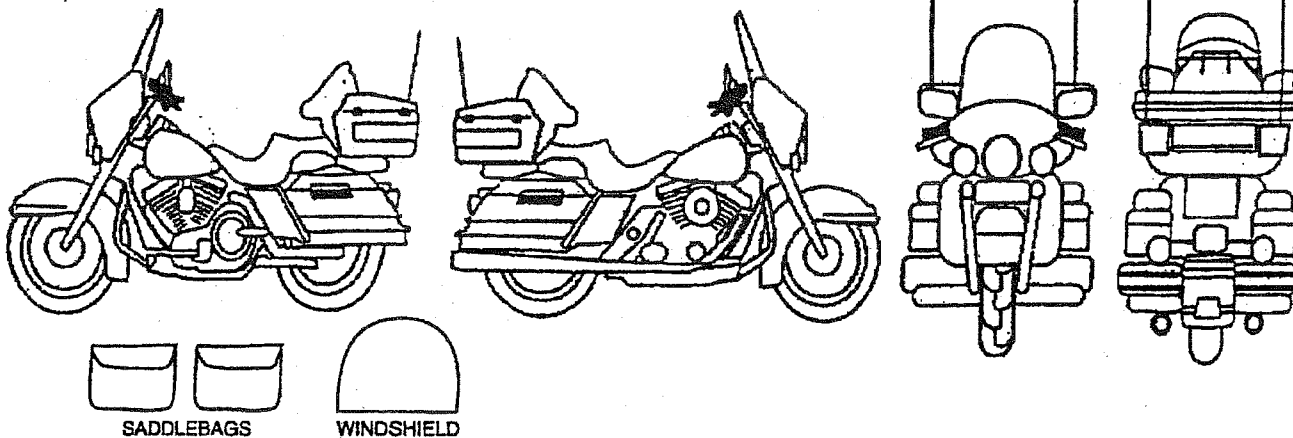
Year: _____ Make and Model: _____ Lic # _____ Prov/State: _____

VIN # _____ Odometer: _____ Color: _____

If COD amount: _____ Declared Value: _____ Appraisal Attached: _____

Excess Valuation Declaration (must have appraisal) \$ _____ Signature: _____ Date: _____

Please Indicate on Motorcycle as per legend below:



B	Bent	CU	Crushed	M	Missing	RU	Rusty	TU	Touch up Paint
BR	Broken	D	Dent	N	Nicked	S	Scraped	W	Watermarks
BU	Burnt	F	Faded	P	Paint	SC	Scatched		
C	Chipped	G	Gouged	PT	Pitted	SD	Soiled		
CR	Cracked	L	Loose	R	Rubbed	T	Torn		

Additional Comments Detailing Overall or Specific Condition: _____

Photos: _____ taken by: _____

I agree that this is a fair assessment of the current condition of the described motorcycle.

ORIGIN	Owner Signature	Date	DESTINATION		Date
ORIGIN	Warehouse Signature	Date	DESTINATION	Warehouse Signature	Date
ORIGIN		Date	DESTINATION	Owner Signature	Date