



J&S Quality Logistics LLC

Customer Quote Form

Company Name:

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Name

First Name

Last Name

Phone Number

Area Code

Phone Number

Email Address:

example@example.com

What is the Origin & Designation of Shipment?

What is the Approx loaded Miles?

What is the Commodity of Shipment?

What is the total Weight of shipment?

What is your equipment type?

- ☐ Dry Van
- ☐ Reefer
- ☐ Flatbed
- ☐ Box Truck
- ☐ Hotshot
- ☐ Other

If Reefer, whats your temperature requirements?

What are the opening and closing hours?

Is the items palletized, unpalletized, or other?

If the items are palletized, How many?

Will this be a dedicated, sealed, partial, or contracted shipment? Please Explain.

- ☐ Palletized
- ☐ Unpalletized
- ☐ Sealed
- ☐ Partial
- ☐ Full Truckload

Whats your target rate?

How often would you need our services?

Are there any additional services needed?

- ☐ Liftgate Usage
- ☐ Driver Assistance
- ☐ Tarps
- ☐ Blankets
- ☐ Other

Date

Month Day Year

