

JXX GEELONG APPOINTMENT FORM

Customer Details Name / Company :		
Postal Address :		
City / Suburb :	Post Code :	State :
Contact person :	Ph	ione :
Email address :		
Types of Transport Service : (Tick	if applicable or give other de	ascription)
Types of Transport Service: (Tick if applicable or give other description)		
Home Removals War	ehouse Removals	Courier Service
Office Removels Gen	eral Transport	Waste Transport
Insterstate Moves Oth	er:	
Goods Collection		
Pick up date : Pick up time :	Pick up address :	
Goods Delivery	D. I.	
Delivery date : Delivery time :	Delivery address :	
Types of Goods : (please describe Goods sizes CBM/weights/number of items/special care to fragile goods)		
I hereby appoint JRE Logistics Pty Ltd for the above transport service and confirmed that the above information provided is correct.		
Customer Signature :		Date :

