



1. Date of Agreement	BROKER/MOTOR CARRIER AGREEMENT
2. Broker (name/place of business) CROWLEY LOGISTICS, INC. 9487 Regency Square Boulevard N. Jacksonville, FL 32225 Attn: Valeria Jackson E-mail: Valeria.Jackson@Crowley.com Tel: 904-727-2161 Fax: 904-805-1641 FMC#:	3. Motor Carrier (name/place of business) Attn: E-Mail: Tel: Fax: FMC#:
4. Rates and Charges (Cl. 3):	
4.1. Rates: Rates shall be set forth in a Rate Confirmation in the form attached hereto as ANNEX "A" which is incorporated herein and shall apply to each and every shipment hereunder All other charges shall be pre-approved and agreed in writing prior to dispatch. Unless otherwise specified, Rand McNally Household Goods miles shall determine all mileage for truckload shipments.	4.2. Accessorial Charges: Driver detention: _____ per hour after _____ free hours Stop off charges: _____ per stop. (For stops within 30-mile commercial zones) Driver assist: _____ Tarp _____ Tiedown _____ Additional or different Accessorial Charges may be set forth in an ANNEX "A", Rate Confirmation, which shall apply
4.3 Incidental Charges <u>Driver waiting time:</u> Motor Carrier shall notify Broker prior to expiration of free time <u>Driver assist/ tie downs:</u> Motor Carrier shall notify Broker prior to driver assist <u>Overweight penalties:</u> Motor Carrier shall fax a copy of any overweight citation within 24 hours of issuance <u>Hours of issuance:</u> If fax is not available, Motor Carrier shall call Broker's dispatch office (as noted in the work order) and notify Broker of any citation number no later than 24 hours of issuance Additional or different Incidental Charges may be set forth in ANNEX A, Rate Confirmation Sheet, which shall apply	4.4 Specific Service Conditions, if any (Cl. 3.1) None shall apply
5. Date of Termination of Initial Contract Period (Cl. 9)	6. Number of additional clauses covering special provisions, if agreed None shall apply
7. State the amount of Broad Form Cargo Legal Liability insurance coverage required (Cl. 12(ii)): Amount required: U.S.\$ _____ .00 Prior to commencing any services, Motor Carrier shall fax a Certificate of Insurance in accordance with Cl. 12 of Part II to Broker at the number set forth in Box 2	
8. Notices (state postal and e-mail address facsimile number for service notice and communication to the Customer) (Cl. 15) See Box 2 which shall apply	9. Notices (state postal and e-mail address facsimile number for service notice and communication to the Vendor) (Cl. 15) See Box 3 which shall apply

It is mutually agreed between the party stated in Box 2 and the party stated in Box 3 that this Agreement consisting of PART I and PART II as well as all documents attached hereto or available on-line and incorporated by reference herein, shall be performed subject to the conditions contained herein. In the event of a conflict of conditions between parts, the provisions of PART I and all documents incorporated by reference shall prevail over those of PART II to the extent of such conflict but no further.

Signature (Broker) For and on behalf of Broker: CROWLEY LOGISTICS, INC. By: _____ Date: _____	Signature (Motor Carrier) For and on behalf of Motor Carrier By: _____ Its: _____ Date: _____
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