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POD Request

LTL Refrigerated East to West Coast Shipping

Contact Information

Company Name\*: \_\_\_\_\_  
 Contact Name\*: \_\_\_\_\_  
 Phone #\*: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, ST: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_

Customer po#: \_\_\_\_\_

Shipper: \_\_\_\_\_

Release #: \_\_\_\_\_

Order #: \_\_\_\_\_

BOL#: \_\_\_\_\_

# of Pallets: \_\_\_\_\_

weight (lbs): \_\_\_\_\_

Picked up date: \_\_\_\_\_

Delivered to date: \_\_\_\_\_

Shipper\*: \_\_\_\_\_

Address: \_\_\_\_\_

City, ST: \_\_\_\_\_

Order #: \_\_\_\_\_

Pick up Location: \_\_\_\_\_

Address: \_\_\_\_\_ same as

City, ST: \_\_\_\_\_

Order #: \_\_\_\_\_

Consignee: \_\_\_\_\_

Address: \_\_\_\_\_

City, ST: \_\_\_\_\_

Order #: \_\_\_\_\_

Deliver to\*: \_\_\_\_\_

Address: \_\_\_\_\_ same as

City, ST: \_\_\_\_\_

Order #: \_\_\_\_\_

Bill to: \_\_\_\_\_

Address: \_\_\_\_\_

City, ST: \_\_\_\_\_

Order#: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

You will receive a response within 1 business day.