

## BLIND SHIPMENT FORM

Please provide the following information and send to us at [custsvc@centralfreight.com](mailto:custsvc@centralfreight.com) along with your bill of lading for final delivery. PLEASE UNDERSTAND – THIS IS NOT A BILL OF LADING AND SHIPMENT WILL NOT BE PICKED UP UNTIL THE BILL OF LADING FOR FINAL DELIVERY IS RECEIVED AS REQUESTED ABOVE.

**Today's Date:** \_\_\_\_\_ // **CENF PRO number** \_\_\_\_\_ // CUST BOL/SO/PO# \_\_\_\_\_

### **OWNER OR OWNER'S AUTHORIZED AGENT\*:**

I, \_\_\_\_\_, being an authorized representative of \_\_\_\_\_, located at \_\_\_\_\_, hereby authorize Central Freight Lines, to pick up the below shipment. I hereby agree to pay for all fees associated with this service and all other charges related to this shipment.

### **Actual Pick Up Location:**

Name of Customer: \_\_\_\_\_

Contact Person & Phone number: \_\_\_\_\_

Address, City, State and ZIP: \_\_\_\_\_

Show the Shipper name as: \_\_\_\_\_

Date of Pickup: \_\_\_\_\_

### **Actual Delivery Location**

Name of Customer: \_\_\_\_\_

Contact Person & Phone number: \_\_\_\_\_

Address, City, State and ZIP: \_\_\_\_\_

### **Invoice all charges to:**

Name of Customer: \_\_\_\_\_

Contact Person & Phone number: \_\_\_\_\_

Address, City, State and ZIP: \_\_\_\_\_

The requestor of blind shipment services represents it is the owner of the goods or otherwise has the authority to control the shipment and further agrees to defend, indemnify, and hold ODFL harmless, including reasonable attorney fees, should any person or entity allege requestor acted without proper authority or the exercise of the authority in requesting blind shipment service was illegal.