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CLAIMS SERVICES DOCUMENTATION BOOKLET

ABOUT

Proper documentation plays a crucial role in delivering a superior Client Experience.

The following booklet contains all the essential paperwork for long-distance Private Client and Federal Government moves, as well as best practices on completing each document.



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INTRODUCTION

CLICK EACH BOX TO WATCH THE VIDEOS BELOW:

Back to Basics: Claims Prevention

*Jennifer Novak
Bilingual Claims Services Manager*

Claims Documentation Webinar

*Jennifer Novak
Bilingual Claims Services Manager*

Government and Avail Processes

Jodi Walsh, Team Lead, Government & Corporate Services



NEED TO REACH THE CLAIMS SERVICES TEAM? DIRECT YOUR CUSTOMERS TO:

Email: cs@atlasvanlines.ca

Call: 1-800-713-4432

Please ensure that customers are directed to Claims Services for all claims information.

PURCHASE THESE DOCUMENTS AND MORE THROUGH THE ATLAS SHOPPING CART PROGRAM.

Visit page 5 for detailed instructions on how to access the Shopping Cart Program.

Contact the Procurement Department for questions: 1-800-968-3171



IMPORTANT REMINDERS:

- All documents must be completed accordingly to the shippers information example REG#, date, names etc.
- Do not create your own copies of these documents as they may be outdated. The Procurement Department will always have the most current version.
- Please ensure that customers are directed to the Claims Services team for all claim information.
- Refrain from sending your own instructions or claim form to the customer as you may not have current information on file.



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SHOPPING CART PROGRAM

FOLLOW THE STEPS BELOW TO PURCHASE DOCUMENTS & MORE:

STEP 1:

To get setup for the shopping cart, go to: www.atlascanada.com.

STEP 2:

Click on the Services button.

Use your IVAN username and password to login.



STEP 3:

Look for the Shopping Cart on the left hand navigation.

Click on Supplies Request.



STEP 4:

Create an account by clicking the Sign-Up button.

Fill out the form as requested.

Use your IVAN username and password credentials.

New User?

Please click on the sign-up button below to register.



STEP 5:

You will now be able to login and order supplies.



Atlas Canada Order Form

Agent Code: <input type="text" value="6999"/>	Contact Name: <input type="text" value="Jacquelyn McCulloch"/>	Preferred Shipping: <input type="button" value="Select"/>
Agent Name: <input type="text" value="ATLAS VAN LINES (CANADA) LTD."/>	Purchase Order # <input type="text" value="L6H1AS"/>	
Shipping Address: <input type="text" value="485 North Service Road East"/>	Postal Code: <input type="text" value="N6H 1A5"/>	
City: <input type="text" value="Oakville"/>	Province: <input type="text" value="Ontario"/>	
Phone: <input type="text" value="9050440/01"/>	Fax: <input type="text"/>	
Special Instructions: <input type="text"/>	<input type="button" value="Edit Your Profile"/>	
<input type="button" value="Find"/>	<input type="button" value="Submit Order"/>	

Check the item(s) you want to order and enter the quantity beside.

ITEM CODE	DESCRIPTION	SELL QTY	PER QTY	ORDER QTY
3001	Inter-Agency Labour Purchase Orders * 2 part - 8.5" x 11" carbonless - Bilingual	<input type="text" value="11.77"/>	<input type="text" value="50"/>	<input type="text"/>
3007	Credit Card Authorization Form * American Express - Mastercard - Visa * 2 part - 8.5" x 11" - carbonless - English	<input type="text" value="5.46"/>	<input type="text" value="25"/>	<input type="text"/>
4003	DOCUMENT TRANSMITTAL FORM * 2 part - 8.5" x 11" - carbonless	<input type="text" value="3.29"/>	<input type="text" value="25"/>	<input type="text"/>

Atlas Canada Supplies Request

Username:

Password:

Existing users: You must now use your IVAN password to login to your account.





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WHEN TO SCAN YOUR DOCUMENTS

DOCUMENTS TO BE SCANNED WITHIN 10 DAYS OF LOADING:

- Electronic Survey and related survey information
- Mandatory Acknowledgment Receipt for Pre-Move Information Booklet (Government)
- Confirmation Letter – With an acknowledged receipt from the customer
- Quality Assurance Certificate
- Pack/Unpack Services Report (Private Client, Corporate, Government)
- Damage/Loss Packed Items Report
- Third Party Invoices
- Final Estimate

SCANNING TIPS:

- Detach the top or bottom section indicated on document prior to scanning
- Properly index the document type
- Ensure all scanned documents are legible
- Ensure all scanned documents are in the correct direction prior to scanning
- Inventories must be numbered (page X of X) and in numerical order

DOCUMENTS TO BE SCANNED WITHIN 10 DAYS OF DELIVERY:

- Scale Tickets
- Bill of Lading
- Pack/Unpack Report – When completed by PVO
- Inventories
- Inventory of Items of High Value (Private Client, Corporate, Government)
- Mandatory Inventory Check-Off Sheet (BINGO)
- Additional Services Performed Report
- Recreational Vehicle Condition Report
- Recreational Vehicle Rider to Inventory
- Rider to Inventory
- Incident Report as Required

SET UP CARTONS

- Set-Up Cartons are an **Essential Service** and mandatory on all moves.
- It must be listed as the first or last item on the **Inventories** so it can easily be found.
- Penalties are applicable to those who do not perform this **Essential Service** properly.

Set-Up Carton Labels



Side Carton Labels



PURCHASE ALL SIDE LABELS AND MORE THROUGH THE ATLAS SHOPPING CART PROGRAM.

Visit the page 5 for detailed instructions on how to access the Shopping Cart Program.

Contact the Procurement Department for questions: 1-800-968-3171

SIDE CARTON LABELS

- Side Carton Labels are an **Essential Service** and mandatory on all moves.
- To be used on all cartons, both agent-packed and owner-packed.
- Helps with locating missing cartons as it contains all the appropriate information.
- Penalties are applicable to those who do not perform this **Essential Service** properly.



TV CARTONS/MATTRESS BAGS

- TV Cartons and new 5mm Mattress Bags are **Essential Services** and mandatory on all moves.
- The customer must sign a waiver if they choose to decline the use of TV Cartons.
- Penalties are applicable to those who do not perform these **Essential Services** properly.





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CONFIRMATION LETTER

- The Confirmation Letter is an **Essential Service** and mandatory on all moves.
- The following Confirmation Letter Template is to be used for all Private Client moves.

**TO OBTAIN A DIGITAL COPY [CLICK HERE](#) PLEASE CONTACT THE MARKETING
DEPARTMENT:**

can-mktg@atlasvanlines.ca



Confirmation Letter

Origin and Destination Information		
Customer Name: _____		
Registration Number: _____		
Origin Agent: _____	Destination Agent: _____	
Email: _____	Phone Number: _____	
Loading Address:		
Address: _____	City/Province: _____	Postal Code: _____
Destination Address:		
Address: _____	City/Province: _____	Postal Code: _____

Re: Confirmation of Move Booked With

_____ / Atlas Van Lines

Date: _____

Thank you for choosing _____ to handle your upcoming move. The following is a summary of your move details including important dates, services selected and specific requirements discussed. Please carefully review the information to verify its accuracy. Please contact your moving consultant immediately to advise of any changes.

Scheduling:

It is highly recommended the owner of the household goods is available on the day of loading. By doing so, you have the opportunity to provide any special instructions that you had not previously provided to us and direct the crew(s) throughout each process. This also allows you to review all move related documentation as it is being prepared prior to signing. Before the crew leaves, it is important you verify all services pertaining to the crew have been performed to your satisfaction and the residence/property is in the same condition as prior to their arrival.



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QUALITY ASSURANCE CERTIFICATE

- The QAC is an **Essential Service** and mandatory on all moves.
- Customer must be taken through this document and clearly explained each element prior to signing.
- Penalties are applicable to those who do not perform this **Essential Service** properly.

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<p>Atlas Canada and its network of full service moving company agents believe that strong communication is an essential element to the success of any relocation. Your moving consultant will clearly explain each aspect of the relocation to you and to ensure your satisfaction, we will put everything in writing. This certificate and the signature contained is your "GUARANTEE" of our commitment.</p> <p><input checked="" type="checkbox"/> ESTIMATE: The method by which the estimated cost has been calculated and outlined on the proposal.</p> <p><input checked="" type="checkbox"/> MOVING PROCESS: The responsibilities of all Atlas personnel during your move: Origin Agent, Professional Van Operator & Crew, and the Destination Agent.</p> <p><input checked="" type="checkbox"/> TIME TRANSIT SCHEDULE: The method by which the schedule of service dates is determined. Once this schedule has been set, you will receive written confirmation.</p> <p><input checked="" type="checkbox"/> VAN OPERATOR COMMUNICATION: An explanation of when you can expect to hear from your van operator while he/she is in transit. Customer is to receive confirmation from our Professional Van Operator a minimum of 24-48 hours before delivery.</p> <p><input checked="" type="checkbox"/> INVENTORY PROCESS: The method by which your possessions will be recorded at origin, (noting condition where applicable), and the process by which a check-off sheet will be used to confirm delivery of goods, (noting condition where applicable), at destination.</p> <p><input checked="" type="checkbox"/> PACKING: The method by which we will professionally pack and wrap your personal and household effects. Note: Damage to the contents of a non-carrier packed carton will not be covered by the carrier unless there is external damage to the carton noted at the time of delivery. <input checked="" type="checkbox"/> Full Pack <input checked="" type="checkbox"/> Partial Pack <input checked="" type="checkbox"/> Owner Pack</p> <p><input checked="" type="checkbox"/> ORIGIN & DESTINATION ACCESS: Determination of the accessibility of the long distance unit, (tractor & trailer), at both origin and destination addresses. An explanation of additional shuttle charges as required, (Consult street view of address(es) as required).</p> <p><input checked="" type="checkbox"/> UNPACKING: The method by which carrier packed items will be removed from cartons and placed openly for inspection. Packing material and debris will be removed upon completion. Note: this service does not include the placement of articles in cupboards, shelves, closets, etc. <input checked="" type="checkbox"/> Unpacking Requested by Customer <input checked="" type="checkbox"/> Unpacking Not Requested by Customer</p> <p><input checked="" type="checkbox"/> INADMISSIBLE ITEMS: An explanation of what types of items cannot be shipped on the moving van as they are flammable, corrosive, explosive, perishable, or have an inherent vice.</p> <p><input checked="" type="checkbox"/> TRANSIT PROTECTION: The coverage options available as discussed: Released <input checked="" type="checkbox"/> Replacement Value Protection <input checked="" type="checkbox"/> Explanation to client of items that are Excluded from Coverage <input checked="" type="checkbox"/> Transit Protection Certificate Received <input checked="" type="checkbox"/> High Value Items Identified</p> <p><input checked="" type="checkbox"/> PAYMENT: Initial appropriate method of payment to be collected prior to delivery. <input checked="" type="checkbox"/> COD - Certified cheque, cash, or money order, upon delivery <input checked="" type="checkbox"/> VISA/MASTERCARD/AMEX <input checked="" type="checkbox"/> Invoice employer (subject to credit approval and receipt of written authority)</p> <p><input checked="" type="checkbox"/> CROSS BORDER: Relocations to the United States require a completed 3299 form; proof of status, (work visa, US permanent resident card, or US citizenship), and a copy of your photo ID, (passport).</p> <p><input checked="" type="checkbox"/> CONFIRMATION: Details of your relocation will be confirmed in writing.</p> <p><input checked="" type="checkbox"/> FOLLOW-UP QUESTIONNAIRE VIA EMAIL: Customer advised that a follow-up questionnaire will be sent via email.</p> <p>Thank you for this opportunity to discuss your upcoming relocation. Your signature confirms that we have reviewed the above services as they related to your relocation.</p> <p>Customer: _____ Date: _____</p> <p>Moving Consultant: _____</p> <p>Atlas Canada - 485 North Service Road East, Oakville, ON L6H 1A5 www.atlasvanlines.ca</p>	



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INVENTORIES

- Any use of code 26 "owner's risk" must have the customer initials beside it. Please ensure only items necessary are marked under this code.
- The Set-Up Carton must be listed as the first or last item on the **Inventories**.



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INVENTORIES

PROPER INVENTORIES EXAMPLE

Atlas
Carriers
485 North Service Road East
Box 970, Lakeshore West PO
Oakville, Ontario L6K 0C1

Smith, Joan
Morin Heights, Que
Calgary, AB

CONDITION SYMBOL - SYMBOLE POUR CONDITION

1. BROKEN - BRISÉ	12. DENTED - FENDU	14. BENT - PLIÉ	15. SCRATCHED - FROTTE	16. PACKED BY	26. CHAMFERED - RONDÉ
2. BURIED - BURDÉ	13. CRACKED - FRACTURÉ	17. STAINED - TACHÉ	18. SCRATCHED - FROTTE	19. OWNED BY	27. AU RIGUE LIU
3. CHIPPED - ÉCALÉ	19. GOUGED - ENFONCE	20. SOILED - TACHÉ	21. SCRATCHED - FROTTE	20. OWNED BY	28. PROMPTÉRÉ
4. CRACKED - FRACTURÉ	21. CRACKED - FRACTURÉ	22. SOILED - TACHÉ	23. SCRATCHED - FROTTE	21. OWNED BY	29. DÉMONTE
5. DESTROYED - DÉTRUIT	11. RUSTED - ROUILLE	24. EMPAQUETÉ PAR	25. SCRATCHED - FROTTE	22. OWNED BY	30. PREVIOUSLY REPAIRED
6. DESTROYED - DÉTRUIT	12. MECHANICALLY IRATING	26. OWNED BY	27. SCRATCHED - FROTTE	23. OWNED BY	31. REASSEMBLED
7. DESTROYED - DÉTRUIT	13. CONSTRUCTION UNKNOWN	27. OWNED BY	28. SCRATCHED - FROTTE	24. OWNED BY	32. REPAIR
8. DESTROYED - DÉTRUIT	14. MISSING - MANQUANT	28. OWNED BY	29. SCRATCHED - FROTTE	25. OWNED BY	33. REPAIR
9. DESTROYED - DÉTRUIT	15. SOILED - SOUILLÉ	29. OWNED BY	30. SCRATCHED - FROTTE	26. OWNED BY	34. REPAIR
10. DESTROYED - DÉTRUIT	16. SOILED - SOUILLÉ	30. OWNED BY	31. SCRATCHED - FROTTE	27. OWNED BY	35. REPAIR
11. DESTROYED - DÉTRUIT	17. SOILED - SOUILLÉ	31. OWNED BY	32. SCRATCHED - FROTTE	28. OWNED BY	36. REPAIR
12. DESTROYED - DÉTRUIT	18. SOILED - SOUILLÉ	32. OWNED BY	33. SCRATCHED - FROTTE	29. OWNED BY	37. REPAIR
13. DESTROYED - DÉTRUIT	19. SOILED - SOUILLÉ	33. OWNED BY	34. SCRATCHED - FROTTE	30. OWNED BY	38. REPAIR
14. DESTROYED - DÉTRUIT	20. SOILED - SOUILLÉ	34. OWNED BY	35. SCRATCHED - FROTTE	31. OWNED BY	39. REPAIR
15. DESTROYED - DÉTRUIT	21. SOILED - SOUILLÉ	35. OWNED BY	36. SCRATCHED - FROTTE	32. OWNED BY	40. REPAIR
16. DESTROYED - DÉTRUIT	22. SOILED - SOUILLÉ	36. OWNED BY	37. SCRATCHED - FROTTE	33. OWNED BY	41. REPAIR
17. DESTROYED - DÉTRUIT	23. SOILED - SOUILLÉ	37. OWNED BY	38. SCRATCHED - FROTTE	34. OWNED BY	42. REPAIR
18. DESTROYED - DÉTRUIT	24. SOILED - SOUILLÉ	38. OWNED BY	39. SCRATCHED - FROTTE	35. OWNED BY	43. REPAIR
19. DESTROYED - DÉTRUIT	25. SOILED - SOUILLÉ	39. OWNED BY	40. SCRATCHED - FROTTE	36. OWNED BY	44. REPAIR
20. DESTROYED - DÉTRUIT	26. SOILED - SOUILLÉ	40. OWNED BY	41. SCRATCHED - FROTTE	37. OWNED BY	45. REPAIR
21. DESTROYED - DÉTRUIT	27. SOILED - SOUILLÉ	41. OWNED BY	42. SCRATCHED - FROTTE	38. OWNED BY	46. REPAIR
22. DESTROYED - DÉTRUIT	28. SOILED - SOUILLÉ	42. OWNED BY	43. SCRATCHED - FROTTE	39. OWNED BY	47. REPAIR
23. DESTROYED - DÉTRUIT	29. SOILED - SOUILLÉ	43. OWNED BY	44. SCRATCHED - FROTTE	40. OWNED BY	48. REPAIR
24. DESTROYED - DÉTRUIT	30. SOILED - SOUILLÉ	44. OWNED BY	45. SCRATCHED - FROTTE	41. OWNED BY	49. REPAIR
25. DESTROYED - DÉTRUIT	31. SOILED - SOUILLÉ	45. OWNED BY	46. SCRATCHED - FROTTE	42. OWNED BY	50. REPAIR
26. DESTROYED - DÉTRUIT	32. SOILED - SOUILLÉ	46. OWNED BY	47. SCRATCHED - FROTTE	43. OWNED BY	51. REPAIR
27. DESTROYED - DÉTRUIT	33. SOILED - SOUILLÉ	47. OWNED BY	48. SCRATCHED - FROTTE	44. OWNED BY	52. REPAIR
28. DESTROYED - DÉTRUIT	34. SOILED - SOUILLÉ	48. OWNED BY	49. SCRATCHED - FROTTE	45. OWNED BY	53. REPAIR
29. DESTROYED - DÉTRUIT	35. SOILED - SOUILLÉ	49. OWNED BY	50. SCRATCHED - FROTTE	46. OWNED BY	54. REPAIR
30. DESTROYED - DÉTRUIT	36. SOILED - SOUILLÉ	50. OWNED BY	51. SCRATCHED - FROTTE	47. OWNED BY	55. REPAIR
31. DESTROYED - DÉTRUIT	37. SOILED - SOUILLÉ	51. OWNED BY	52. SCRATCHED - FROTTE	48. OWNED BY	56. REPAIR
32. DESTROYED - DÉTRUIT	38. SOILED - SOUILLÉ	52. OWNED BY	53. SCRATCHED - FROTTE	49. OWNED BY	57. REPAIR
33. DESTROYED - DÉTRUIT	39. SOILED - SOUILLÉ	53. OWNED BY	54. SCRATCHED - FROTTE	50. OWNED BY	58. REPAIR
34. DESTROYED - DÉTRUIT	40. SOILED - SOUILLÉ	54. OWNED BY	55. SCRATCHED - FROTTE	51. OWNED BY	59. REPAIR
35. DESTROYED - DÉTRUIT	41. SOILED - SOUILLÉ	55. OWNED BY	56. SCRATCHED - FROTTE	52. OWNED BY	60. REPAIR
36. DESTROYED - DÉTRUIT	42. SOILED - SOUILLÉ	56. OWNED BY	57. SCRATCHED - FROTTE	53. OWNED BY	61. REPAIR
37. DESTROYED - DÉTRUIT	43. SOILED - SOUILLÉ	57. OWNED BY	58. SCRATCHED - FROTTE	54. OWNED BY	62. REPAIR
38. DESTROYED - DÉTRUIT	44. SOILED - SOUILLÉ	58. OWNED BY	59. SCRATCHED - FROTTE	55. OWNED BY	63. REPAIR
39. DESTROYED - DÉTRUIT	45. SOILED - SOUILLÉ	59. OWNED BY	60. SCRATCHED - FROTTE	56. OWNED BY	64. REPAIR
40. DESTROYED - DÉTRUIT	46. SOILED - SOUILLÉ	60. OWNED BY	61. SCRATCHED - FROTTE	57. OWNED BY	65. REPAIR
41. DESTROYED - DÉTRUIT	47. SOILED - SOUILLÉ	61. OWNED BY	62. SCRATCHED - FROTTE	58. OWNED BY	66. REPAIR
42. DESTROYED - DÉTRUIT	48. SOILED - SOUILLÉ	62. OWNED BY	63. SCRATCHED - FROTTE	59. OWNED BY	67. REPAIR
43. DESTROYED - DÉTRUIT	49. SOILED - SOUILLÉ	63. OWNED BY	64. SCRATCHED - FROTTE	60. OWNED BY	68. REPAIR
44. DESTROYED - DÉTRUIT	50. SOILED - SOUILLÉ	64. OWNED BY	65. SCRATCHED - FROTTE	61. OWNED BY	69. REPAIR
45. DESTROYED - DÉTRUIT	51. SOILED - SOUILLÉ	65. OWNED BY	66. SCRATCHED - FROTTE	62. OWNED BY	70. REPAIR
46. DESTROYED - DÉTRUIT	52. SOILED - SOUILLÉ	66. OWNED BY	67. SCRATCHED - FROTTE	63. OWNED BY	71. REPAIR
47. DESTROYED - DÉTRUIT	53. SOILED - SOUILLÉ	67. OWNED BY	68. SCRATCHED - FROTTE	64. OWNED BY	72. REPAIR
48. DESTROYED - DÉTRUIT	54. SOILED - SOUILLÉ	68. OWNED BY	69. SCRATCHED - FROTTE	65. OWNED BY	73. REPAIR
49. DESTROYED - DÉTRUIT	55. SOILED - SOUILLÉ	69. OWNED BY	70. SCRATCHED - FROTTE	66. OWNED BY	74. REPAIR
50. DESTROYED - DÉTRUIT	56. SOILED - SOUILLÉ	70. OWNED BY	71. SCRATCHED - FROTTE	67. OWNED BY	75. REPAIR
51. DESTROYED - DÉTRUIT	57. SOILED - SOUILLÉ	71. OWNED BY	72. SCRATCHED - FROTTE	68. OWNED BY	76. REPAIR
52. DESTROYED - DÉTRUIT	58. SOILED - SOUILLÉ	72. OWNED BY	73. SCRATCHED - FROTTE	69. OWNED BY	77. REPAIR
53. DESTROYED - DÉTRUIT	59. SOILED - SOUILLÉ	73. OWNED BY	74. SCRATCHED - FROTTE	70. OWNED BY	78. REPAIR
54. DESTROYED - DÉTRUIT	60. SOILED - SOUILLÉ	74. OWNED BY	75. SCRATCHED - FROTTE	71. OWNED BY	79. REPAIR
55. DESTROYED - DÉTRUIT	61. SOILED - SOUILLÉ	75. OWNED BY	76. SCRATCHED - FROTTE	72. OWNED BY	80. REPAIR
56. DESTROYED - DÉTRUIT	62. SOILED - SOUILLÉ	76. OWNED BY	77. SCRATCHED - FROTTE	73. OWNED BY	81. REPAIR
57. DESTROYED - DÉTRUIT	63. SOILED - SOUILLÉ	77. OWNED BY	78. SCRATCHED - FROTTE	74. OWNED BY	82. REPAIR
58. DESTROYED - DÉTRUIT	64. SOILED - SOUILLÉ	78. OWNED BY	79. SCRATCHED - FROTTE	75. OWNED BY	83. REPAIR
59. DESTROYED - DÉTRUIT	65. SOILED - SOUILLÉ	79. OWNED BY	80. SCRATCHED - FROTTE	76. OWNED BY	84. REPAIR
60. DESTROYED - DÉTRUIT	66. SOILED - SOUILLÉ	80. OWNED BY	81. SCRATCHED - FROTTE	77. OWNED BY	85. REPAIR
61. DESTROYED - DÉTRUIT	67. SOILED - SOUILLÉ	81. OWNED BY	82. SCRATCHED - FROTTE	78. OWNED BY	86. REPAIR
62. DESTROYED - DÉTRUIT	68. SOILED - SOUILLÉ	82. OWNED BY	83. SCRATCHED - FROTTE	79. OWNED BY	87. REPAIR
63. DESTROYED - DÉTRUIT	69. SOILED - SOUILLÉ	83. OWNED BY	84. SCRATCHED - FROTTE	80. OWNED BY	88. REPAIR
64. DESTROYED - DÉTRUIT	70. SOILED - SOUILLÉ	84. OWNED BY	85. SCRATCHED - FROTTE	81. OWNED BY	89. REPAIR
65. DESTROYED - DÉTRUIT	71. SOILED - SOUILLÉ	85. OWNED BY	86. SCRATCHED - FROTTE	82. OWNED BY	90. REPAIR
66. DESTROYED - DÉTRUIT	72. SOILED - SOUILLÉ	86. OWNED BY	87. SCRATCHED - FROTTE	83. OWNED BY	91. REPAIR
67. DESTROYED - DÉTRUIT	73. SOILED - SOUILLÉ	87. OWNED BY	88. SCRATCHED - FROTTE	84. OWNED BY	92. REPAIR
68. DESTROYED - DÉTRUIT	74. SOILED - SOUILLÉ	88. OWNED BY	89. SCRATCHED - FROTTE	85. OWNED BY	93. REPAIR
69. DESTROYED - DÉTRUIT	75. SOILED - SOUILLÉ	89. OWNED BY	90. SCRATCHED - FROTTE	86. OWNED BY	94. REPAIR
70. DESTROYED - DÉTRUIT	76. SOILED - SOUILLÉ	90. OWNED BY	91. SCRATCHED - FROTTE	87. OWNED BY	95. REPAIR
71. DESTROYED - DÉTRUIT	77. SOILED - SOUILLÉ	91. OWNED BY	92. SCRATCHED - FROTTE	88. OWNED BY	96. REPAIR
72. DESTROYED - DÉTRUIT	78. SOILED - SOUILLÉ	92. OWNED BY	93. SCRATCHED - FROTTE	89. OWNED BY	97. REPAIR
73. DESTROYED - DÉTRUIT	79. SOILED - SOUILLÉ	93. OWNED BY	94. SCRATCHED - FROTTE	90. OWNED BY	98. REPAIR
74. DESTROYED - DÉTRUIT	80. SOILED - SOUILLÉ	94. OWNED BY	95. SCRATCHED - FROTTE	91. OWNED BY	99. REPAIR
75. DESTROYED - DÉTRUIT	81. SOILED - SOUILLÉ	95. OWNED BY	96. SCRATCHED - FROTTE	92. OWNED BY	100. REPAIR
76. DESTROYED - DÉTRUIT	82. SOILED - SOUILLÉ	96. OWNED BY	97. SCRATCHED - FROTTE	93. OWNED BY	
77. DESTROYED - DÉTRUIT	83. SOILED - SOUILLÉ	97. OWNED BY	98. SCRATCHED - FROTTE	94. OWNED BY	
78. DESTROYED - DÉTRUIT	84. SOILED - SOUILLÉ	98. OWNED BY	99. SCRATCHED - FROTTE	95. OWNED BY	
79. DESTROYED - DÉTRUIT	85. SOILED - SOUILLÉ	99. OWNED BY	100. SCRATCHED - FROTTE	96. OWNED BY	
80. DESTROYED - DÉTRUIT	86. SOILED - SOUILLÉ				



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HIGH VALUE INVENTORIES

- Any unusual, rare collectible items, in excess of \$5,000 must be listed on this document.
- Written appraisals must be included along with this completed document.
- If the customer does not have any high value items, please write "N/A" on this document with the customer's signature.

485 North Service Road East
Box 970, Lakeshore West PO
Oakville, Ontario L6K 0C1
Tel. (905) 844-0701

Inventory of High Value Items

If you elect to purchase **cargo protection** for your household items during transit with Atlas Van Lines (Canada) Ltd., single, unusual, rare collectible items, or having a value in excess of \$5,000.00 must be listed on this schedule. The value of these items shall be added to the declared value of the shipment and identified separately on the Bill of Lading.

Value must be confirmed by written appraisal and the completed statement with appraisals delivered to the carrier before packing date. Any claim for loss or damage must be supported by proof of value and the settlement will be based upon the Bill of Lading terms and conditions, the tariff in effect and the valuation declared.

I understand that the following items will not be accepted by Atlas Van Lines for transport (due to their value which is excluded from coverage and/or difficulty in replacing them). I acknowledge that I should transport these items personally or make other arrangements.

- Jewellery, coins, currency, stamps, or any other negotiable paper (stock certificates, bonds, notes, etc.)
- Important papers (deeds, titles, bank books, tax and similar documents)
- Precious metals, precious or semi-precious stones or gems, gold, silver

DESCRIPTION OF HIGH VALUE ITEMS	VALUE	DESCRIPTION OF HIGH VALUE ITEMS	VALUE
Antiques, Oriental Rugs, Tapestries		Glass, China, Crystal, Silverware	
Clothing (Furs, Shoes, etc.)		Hobbies/Rare Collectible Items	
Art Objects (Paintings, Sculptures, Figurines)		Books, Musical Instruments	
Professional Equipment (Photography, Sound Equipment, Tools)		Computer/Software	
Other		Other	

Carrier hereby acknowledges receipt of completed document with or without appraisals attached.

Customer Name:		Registration Number:	
Customer Signature:		Date:	
Agent:	Agency Code:	Agent Signature:	

Part 1 - Atlas Copy

Part 2 - Customer Copy

Part 3 - Agent Copy

FORM 5255 REV 06/22



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RIDER TO INVENTORY

- Used when a shipment goes in/out of warehouse, on third party trailers, etc.
- Unless it's a third party trailer, both signatures must be obtained on the rider.
- Must indicate any damage to items and include pictures if possible.
- Scan into Atlas within 24-48 hours when used for third-party trailers or vaults.



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BILL OF LADING

- Verify the customer has signed the document in all the appropriate locations.
- Signature must be included in the appropriate valuation box selected.
- If the shipment went into storage, indicate clearly the agent # and complete the bottom left section.
- This document is always referred to when resolving claims and is essential for liability purposes.

UNIFORM HOUSEHOLD GOODS BILL OF LADING - NOT NEGOTIABLE												REGISTRATION NO. [REDACTED]					
SUBJECT TO THE FOLLOWING CONDITIONS AND THOSE ON THE REVERSE THEREOF																	
<p>1. ALL REGULATIONS, RATES AND CHARGES IN EFFECT ON DAY OF LOADING SHALL COVER THIS SHIPMENT; ALL CHARGES WILL BE AUDITED, AND IF NECESSARY CORRECTED BY REFUND, OR ADDITIONAL BILLING.</p> <p>2. THE UNIFORM CONDITIONS OF CARRIAGE AS WRITTEN, PRINTED, STAMPED OR TYPED ON THE FRONT OR BACK OF THIS FORM APPLY AND ARE AGREED TO BY BOTH PARTIES, IN EVENT OF ANY VARIATION BETWEEN THE PROVISIONS OF THE FORM AND THE PROVISIONS HEREOF, THESE OF THE BILL OF LADING SHALL PREVAIL.</p> <p>3. DECLARATION OF VALUE OPTION A: RELEASED - CONSIGNOR HEREBY RELEASES THE SHIPMENT AT ATLAS LEGAL LIABILITY OF \$ [REDACTED] PER POUND PER ARTICLE</p> <p>CONSIGNOR OR REPRESENTATIVE SIGNATURE [REDACTED]</p> <p>OPTION B: FULL VALUE PROTECTION - CONSIGNOR ELECTS TO DECLARE, AT ADDITIONAL COSTS, FULL VALUE PROTECTION WHICH MUST NOT BE LESS THAN \$ [REDACTED] PER POUND COMPUTED ON THE TOTAL WEIGHT OF THE SHIPMENT, WHICHEVER IS GREATER! INITIALS</p> <p>HOUSEHOLD GOODS \$ [REDACTED] X</p> <p>AUTO/REC. VEHICLE \$ [REDACTED] X</p> <p>*EXTRAORDINARY ITEMS \$ [REDACTED] X</p> <p>CONSIGNOR OR REPRESENTATIVE SIGNATURE [REDACTED]</p>																	
<p>4. UNLESS PAYMENT HAS BEEN OTHERWISE ARRANGED, THE CARRIER WILL NOT RELINQUISH POSSESSION OF THE SHIPMENT UNTIL ALL CHARGES ARE PAID IN CASH, CREDIT CARD, MONEY ORDER OR CERTIFIED CHEQUE AND PROVIDING THE CARRIER WITH A COPY OF THE BILL OF LADING. PAYMENT OF ACTUAL COSTS IN EXCESS OF 10% OF ESTIMATED COSTS, REFER TO RULE 11 ON THE CONDITIONS OF CARRIAGE.</p> <p>5. SHIPPER REMAINS LIABLE AND SEVERALLY LIABLE FOR ALL CHARGES, INTEREST ON OVERDUE ACCOUNTS, PAYABLE AT 1% (ONE AND ONE-HALF PERCENT) PER MONTH/1% (ONE PERCENT) ANNUALLY (FROM THE DATE OF SHIPMENT).</p> <p>6. IF SHIPMENT CONTAINS ANY DOCUMENTS SPECIFIC OR ARTICLES OF EXTRAORDINARY VALUE, SHIPPER MUST LIST THEM ON AN ATTACHMENT HERETO.</p> <p>7. I WARRANT THAT THIS SHIPMENT OF GOODS DOES NOT CONTAIN ANY DANGEROUS SUBSTANCES AS DEFINED UNDER THE TRANSPORTATION OF DANGEROUS GOODS ACT OF CANADA OR ANY PROVINCE OR TERRITORY, EXCEPT SUCH GOODS AS ARE EXEMPT PURSUANT TO SUCH APPLICABLE ACT AND REGULATIONS THEREUNDER. I ALSO WARRANT THAT ALL THE GOODS ARE OR WILL BE SHIPPED MARKED CONSUMER PRODUCTS/DANGEROUS GOODS EXCEPT AND SHOWN AS SUCH ON THE INVENTORIES.</p> <p>8. SHIPPER'S DECLARATION: I AM THE LEGAL OWNER OF THE FURNITURE AND EFFECTS REFERRED TO, OR HIS PROPERTY AS ARE SHIPPED. THIS PROPERTY IS LIMITED BY A TERM OR CONDITION OF CARRIAGE CONTAINED IN THE AGREEMENT. I AGREE TO THE FOREIGNING CONTRACT, TERMS AND CONDITIONS AND MAKE THE DECLARATION OF VALUE SET FORTH IN CONDITION 3.</p> <p>SHIPPER OR HIS AGENT X PROFESSIONAL VAN OPERATOR RECEIPT OF GOODS SHIPPER EMAIL: [REDACTED]</p> <p>AGENT CODE [REDACTED] ID # [REDACTED]</p>																	
BILL OF LADING EXT. BY AGENT		DATE:		TOTAL CHARGES GIVEN TO:		<input type="checkbox"/> CONSIGNOR AT ORIGIN <input type="checkbox"/> ORIGIN AGENT		BY:		DATE:							
ESTIMATED WEIGHT		WEIGHT OF SHIPMENT (LBS.)		GROSS TARE		SCALE OWNER SCALE OWNER				RW GROSS		OF GROSS					
ESTIMATED CHARGES										RW TARE		OF TARE					
ESTIMATE CODE		NET		KG X 2.046 = LBS.						RW NET		OF NET					
ORIGIN CONSIGNOR - SHIP FROM																	
NAME		TEL. NO.		DESTINATION CONSIGNEE - TRANSPORT AND DELIVER TO													
STREET		STREET															
CITY/PROV./PC		CITY/PROV./PC															
EXTRA P/M		EXTRA DELIVERY															
SPECIAL INSTRUCTIONS																	
BOOKING AGENT				ORIGIN AGENT				DESTINATION AGENT									
TELEPHONE				TELEPHONE				TELEPHONE									
DATES TO PACK		LOAD DATES		AGREED DELIVERY PERIOD													
AFTER LOADING PHONE				FROM:		TO:				PER CWT		CUSTOMER - PLEASE CONTACT THE DESTINATION AGENT UPON YOUR ARRIVAL AT DESTINATION					
TRANSPORTATION		MILES		LBS. AS		LBS. AT \$		PER CWT		PER CWT		\$					
TARIFF		SECTION				LHD		PER LBS.		PER LBS.							
DRIVER INSTRUCTIONS:																	
ADDITIONAL TRANSPORTATION AND OTHER CHARGES																	
AGENT NO.																	
1.																	
2.																	
3.																	
4.																	
5.																	
6.																	
7.																	
8.																	
9.																	
STORAGE IN TRANSIT		WEIGHT		RATE		AGENT NO.		TOTAL		VALUATION(ITEM 3)		PER \$100.00					
S.I.T. HANDLING										PACKING SERVICES							
S.I.T. STORAGE MONTHS										PACKED BY:		UNPACKED BY:					
S.I.T. PICK-UP OR DELIVERY										PACK CHARGES:							
CONTAINER S.I.T./VALUATION										PACKING MATERIALS CHARGE							
A/P:				SUB-TOTAL				→		→		→					
INVENTORY TAG COLOUR				INVENTORY TAG LOT NUMBER				TAG #'S USED : FROM				TO:					
AGENT NO.	DRIVER NAME	ID #	FROM	FROM DATE	TO	TO DATE	MILES	V/L-S/O-G11	WHSE AGENT NO.	CHARGES							
										G.S.T./H.S.T.							
										P.S.T.							
										TOTAL CHARGES & C.O.							
										LESS DEPOSIT RECEIVED							
D/A AUTH #		D/V AUTH #		D/D AUTH #				DDR <input type="checkbox"/>		SIT <input type="checkbox"/>		SIV <input type="checkbox"/>		BALANCE DUE			
ORIGIN/DESTN S.I.T. DATE				AGENT NO.				C.O.D. <input type="checkbox"/>		INVOICE <input type="checkbox"/>		PREPAID <input type="checkbox"/>					
CITY		AGENT						VISA <input type="checkbox"/>		AUTH #							
SIGNATURE:								AMEX <input type="checkbox"/>		AMOUNT		BY: NAME		AGENT NO.			
CONSIGNOR'S RECEIPT SERVICES ORDERED WERE PERFORMED AND SHIPMENT WAS RECEIVED IN GOOD CONDITION EXCEPT AS NOTED ON INVENTORY. SIGNATURE OF THE CONSIGNEE FOR RECEIPT OF GOODS SHALL NOT PRECUE FUTURE CLAIM FOR LOSS OR DAMAGE MADE WITHIN THE TIME LIMIT AS PRESCRIBED BY RULE 12 ON THE REVERSE HEREOF								DEPOSIT RECEIVED						DATE			
CONSIGNOR OR REPRESENTATIVE		X		DATE OF DELIVERY				REC'D ON DELIVERY									



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CONDITIONS OF CARRIAGE

- When printing the Bill of Lading on AtlasNet, ensure the customer is receiving the Conditions of Carriage found on page 2 of the Bill of Lading.
- A signed copy of both the Bill of Lading and Conditions of Carriage must be scanned into RVI.

CONDITIONS OF CARRIAGE	
1. Liability of the Carrier	6. Delay
<p>The carrier of the goods herein described is liable for any loss of or damage to goods accepted by him or his agent, except as hereinafter provided.</p>	
2. Liability of Originating and Delivering Carriers	7. Routing by the Carrier
<p>Where a shipment is accepted for carriage by more than one carrier, the original contracting carrier and the carrier who assumes responsibility for the delivery to the consignee herein and the carrier of the goods in an ordinary general liability manner are liable jointly and severally for any loss of or damage to the goods while they are in the custody of any other carrier to whom the goods are or have been delivered and from which liability the other carrier is not relieved.</p>	
3. Recovering from Connecting Carrier	8. Stoppage in Transit
<p>The original contracting carrier or the delivering carrier, as the case may be, is entitled to recover any amount paid by him in respect of goods which have been delivered to the amount of loss or damage first suffered by the original contracting carrier or delivering carrier, as the case may be, or may be required to pay hereunder resulting from any loss of or damage to the goods while in the custody of such other carrier.</p>	
4. Remedy by Consignor or Consignee	9. Valuation
<p>Nothing in article 2 or 3 deprives a consignor or consignee of any rights he may have against any carrier.</p>	
5. Exceptions from Liability	10. Maximum Liability
<p>The carrier shall not be liable for:</p> <ul style="list-style-type: none"> (a) Loss, damage, or delay to any of the goods described in the contract of carriage caused by an act of God, The Queen's or public enemy's acts, strikes, acts of terrorism, or the goods, an act or default of the consignor, owner or consignee, authority of law, or quarantine. (b) Other than because of his, his agent's or employee's negligence. (c) Damage to fragile articles that are not packed and unpacked by the contracting carrier, his agent or employees. (d) Damage to the mechanical, electronic, or other operations of radios, phonographs, clocks, appliances, musical instruments and other equipment, irrespective of who packed or unpacked such articles, unless serving and preparation was performed by the contracting carrier, his agent or employees. (e) Detachment of or damage to perishable food, plants, or pets. (f) Loss or contents of consequential articles, unless the contents, less or opened for the carrier's inspection, are articles are listed on the bill of lading and recognized for by the carrier. 	
<p>Burden of proving absence of such negligence shall be on the carrier.</p>	
<p>(c) Damage to or loss of a complete set or unit when only part of such set is damaged or lost, in which event the carrier shall only be liable for repair or recovering of the lost or damaged piece or pieces.</p>	
<p>(d) Damage to the goods at place or places of pickup at which the consignor or his agent is not in attendance.</p>	
<p>(e) Damage to the goods at place or places of delivery at which the consignee or his agent is not in attendance and cannot give receipt for goods delivered.</p>	
<p>(a) The amount of any loss or damage computed under article 9 shall not exceed the greater of:</p> <ul style="list-style-type: none"> (i) The value declared by the consignor, or (ii) \$8.82 per kilogram computed on the total weight of the shipment. <p>Provided that, where the consignor releases the shipment to a value of \$1.32 per kilogram per article or less in writing, the amount of any loss or damage computed under article 9 shall not exceed such lower amount.</p> <p>(b) Where clause (i) or (ii) applies, additional charges to cover the additional coverage of \$1.32 per kilogram per article shall be paid by the consignor.</p>	
<p>11. Consignor's Risk</p> <p>When it is agreed that the goods are carried at the risk of the consignor of the goods, such agreement covers only such risks as are necessarily incidental to transportation and the agreement shall relieve the carrier from liability for any loss or damage which may result from any negligent act or omission of the carrier, his agents or employees and the burden of proving absence of negligence shall be on the carrier.</p>	
<p>12. Notice of Claim</p> <p>(a) The carrier is liable for loss, damage or delay due to any goods carried under the bill of lading unless notice thereof is given to the carrier within the time of delivery, and date of shipment of the goods and the estimated arrival date in respect of such loss, damage, or delay is given in writing to the original contracting carrier or the connecting carrier within 50 (50) days after delivery of the goods, or, in case of failure to make delivery, within nine (9) months from the date of shipment.</p> <p>(b) The final statement of the claim must be filed within 6 (6) months from the date of shipment.</p>	
<p>SHIPPERS DECLARATION: I UNDERSTAND THE CARRIER'S LIABILITY IS LIMITED BY THE TERMS IN THE CONDITIONS OF CARRIAGE CONTAINED IN THE AGREEMENT. I AGREE TO THE FOREGOING CONTRACT, TERMS AND CONDITIONS</p>	
<p>SHIPPER SIGNATURE</p>	
<p>DATE</p>	



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BINGO

- BINGO Sheets are mandatory on all shipments.
- Must be given to the customer at destination prior to unloading any items.
- If customer does not want to check-off the BINGO, you must indicate in writing that the "customer elects not to check-off shipment". Both customer and PVO must sign.

MANDATORY INVENTORY CHECK-OFF SHEET / LISTE OBLIGATOIRE DE VÉRIFICATION D'INVENTAIRE																			
DATE : [REDACTED]		CHECKED OFF BY / VÉRIFIÉ PAR : [REDACTED] CODE : [REDACTED]																	
CUSTOMER/CLIENT : [REDACTED]										REGISTRATION NO. / N° D'ENREGISTREMENT : [REDACTED]									
DELIVERING TO / LIVRAISON À : [REDACTED]																			
TAG NUMBERS / NUMÉROS D'ÉTIQUETTE : [REDACTED] TO / À [REDACTED] TAG COLOUR / COULEUR D'ÉTIQUETTE [REDACTED]										TAG SERIES CODE/ CODE DE SÉRIE D'ÉTIQUETTE [REDACTED]									
001	026	051	076	101	126	151	176	201	226	251	276	301	326	351	376	401	426	451	476
002	027	052	077	102	127	152	177	202	227	252	277	302	327	352	377	402	427	452	477
003	028	053	078	103	128	153	178	203	228	253	278	303	328	353	378	403	428	453	478
004	029	054	079	104	129	154	179	204	229	254	279	304	329	354	379	404	429	454	479
005	030	055	080	105	130	155	180	205	230	255	280	305	330	355	380	405	430	455	480
006	031	056	081	106	131	156	181	206	231	256	281	306	331	356	381	406	431	456	481
007	032	057	082	107	132	157	182	207	232	257	282	307	332	357	382	407	432	457	482
008	033	058	083	108	133	158	183	208	233	258	283	308	333	358	383	408	433	458	483
009	034	059	084	109	134	159	184	209	234	259	284	309	334	359	384	409	434	459	484
010	035	060	085	110	135	160	185	210	235	260	285	310	335	360	385	410	435	460	485
011	036	061	086	111	136	161	186	211	236	261	286	311	336	361	386	411	436	461	486
012	037	062	087	112	137	162	187	212	237	262	287	312	337	362	387	412	437	462	487
013	038	063	088	113	138	163	188	213	238	263	288	313	338	363	388	413	438	463	488
014	039	064	089	114	139	164	189	214	239	264	289	314	339	364	389	414	439	464	489
015	040	065	090	115	140	165	190	215	240	265	290	315	340	365	390	415	440	465	490
016	041	066	091	116	141	166	191	216	241	266	291	316	341	366	391	416	441	466	491
017	042	067	092	117	142	167	192	217	242	267	292	317	342	367	392	417	442	467	492
018	043	068	093	118	143	168	193	218	243	268	293	318	343	368	393	418	443	468	493
019	044	069	094	119	144	169	194	219	244	269	294	319	344	369	394	419	444	469	494
020	045	070	095	120	145	170	195	220	245	270	295	320	345	370	395	420	445	470	495
021	046	071	096	121	146	171	196	221	246	271	296	321	346	371	396	421	446	471	496
022	047	072	097	122	147	172	197	222	247	272	297	322	347	372	397	422	447	472	497
023	048	073	098	123	148	173	198	223	248	273	298	323	348	373	398	423	448	473	498
024	049	074	099	124	149	174	199	224	249	274	299	324	349	374	399	424	449	474	499
025	050	075	100	125	150	175	200	225	250	275	300	325	350	375	400	425	450	475	500

THIS FORM IS AN AMENDMENT TO YOUR SHIPPING DOCUMENTS. THE INFORMATION RECORDED ON THIS DOCUMENT WILL BE USED IN THE EVENT A CLAIM IS FILED.
CE FORMULAIRE EST UNE MODIFICATION DE VOS DOCUMENTS D'EXPÉDITION. LES RENSEIGNEMENTS QUI FIGUENT DANS LE PRÉSENT FORMULAIRE SERONT UTILISÉS DANS L'ÉVENTUALITÉ D'UNE DEMANDE D'IDÉMNITÉ.

NOTE: I UNDERSTAND AND AGREE THAT I HAVE PERSONALLY CHECKED OFF ALL NUMBERS RELATING TO THE ITEMS ON MY INVENTORY OF ARTICLES SHIPPED AND THAT THESE HAVE ALL BEEN DELIVERED INTO MY POSSESSION UNLESS OTHERWISE NOTED. ANY DAMAGE/SHORTAGE MUST BE RECORDED ON THIS DOCUMENT AND ON THE INVENTORY OF ARTICLES SHIPPED FORM IN THE "DELIVERY EXCEPTIONS" COLUMN AND ACKNOWLEDGED BY THE DELIVERING VAN OPERATOR OR THE CARRIER CAN BE DISCHARGED FROM LIABILITY. CONTACT ATLAS CANADA AT 1-800-713-4432 IF YOU EXPERIENCE DAMAGE AND/OR LOSS. ALL ITEMS DISMANTLED BY CARRIER AT ORIGIN HAVE BEEN REASSEMBLED AT DELIVERY TO MY SATISFACTION.

NOTA: JE COMPREND ET J'ACCEPTE PAR LA PRÉSENTE AVOIR PERSONNELLEMENT COCHÉ TOUS LES NUMÉROS RELATIFS AUX ARTICLES SUR L'INVENTAIRE DES ARTICLES EXPÉDIÉS ET QUE CEUX-CI M'ONT ÉTÉ LIVRÉS, À MOINS DE MENTION CONTRAIRE À CET EFFET. TOUS LES ARTICLES MANQUANTS OU ENDOMMAGÉS DOIVENT ÊTRE CONSIGNÉS SUR CE DOCUMENT ET SUR LE FORMULAIRE D'INVENTAIRE DES ARTICLES EXPÉDIÉS À LA COLONNE DES "EXCEPTIONS À LA LIVRAISON" ET CELA DOIT ÊTRE ATTESTÉ PAR LE CAMIONNEUR FAISANT LA LIVRAISON, AUTREMENT LE TRANSPORTEUR POURRAIT ÊTRE DÉCHARGÉ DE SA RESPONSABILITÉ. Veuillez COMMUNIQUER AVEC ATLAS CANADA, 1-800-713-4432 SI VOUS CONSTATEZ DES DOMMAGES ET/OU DES PERTES. TOUS LES ARTICLES DÉMONTÉS PAR LE TRANSPORTEUR À L'ORIGINE ONT ÉTÉ REMONTÉS À MA SATISFACTION AU MOMENT DE LA LIVRAISON.

CUSTOMER SIGNATURE: / SIGNATURE DU CLIENT: [REDACTED] DATE: [REDACTED]

EVERYTHING CHECKED OFF / LIVRAISON DE TOUS LES ARTICLES CONFIRMÉS / CUSTOMER TO INITIAL / CLIENT À ÉMARGER: [REDACTED] CUSTOMER INITIAL: [REDACTED]

THIS DOCUMENT HAS BEEN EXPLAINED AND PROVIDED PRIOR TO START OF UNLOAD / CE DOCUMENT A ÉTÉ EXPLIQUÉ ET FOURNI AVANT LE DÉBUT DU DÉCHARGEMENT. YES/OUI: [REDACTED] NO/NON: [REDACTED]

SIGNATURE OF DELIVERING VAN OPERATOR: [REDACTED] SIGNATURE DU CAMIONNEUR: [REDACTED] ID CODE: [REDACTED] CODE D'IDENTIFICATION: [REDACTED] AGENT CODE: [REDACTED] CODE DE L'AGENT: [REDACTED]

CUSTOMER/CLIENT

FORM 6405S 06/19



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BINGO

PROPER BINGO EXAMPLE

MANDATORY INVENTORY CHECK-OFF SHEET / LISTE OBLIGATOIRE DE VÉRIFICATION D'INVENTAIRE																			
DATE : <u>Feb 26/23</u> CHECKED OFF BY / VÉRIFIÉ PAR : _____														CODE : _____					
CUSTOMER/CLIENT : <u>Smith, Joan</u>														REGISTRATION NO. / N° D'ENREGISTREMENT : <u>8999 0001 23</u>					
DELIVERING TO / LIVRAISON À : <u>Calgary, AB</u>																			
TAG NUMBERS / NUMÉROS D'ÉTIQUETTE : <u>250</u> TO / À <u>254</u> TAG COLOUR / COULEUR D'ÉTIQUETTE <u>Green</u>														TAG SERIES CODE/ CODE DE SÉRIE D'ÉTIQUETTE <u>147699</u>					
001	026	051	076	101	126	151	176	201	226	227	276	301	326	351	376	401	426	451	476
002	027	062	077	102	127	152	177	202	227	255	277	302	327	352	377	402	427	452	477
003	028	053	078	103	128	153	178	203	228	255	278	303	328	353	378	403	428	453	478
004	029	054	079	104	129	154	179	204	229	255	279	304	329	354	379	404	429	454	479
005	030	055	080	105	130	155	180	205	230	255	280	305	330	355	380	405	430	455	480
006	031	056	081	106	131	156	181	206	231	256	281	306	331	356	381	406	431	456	481
007	032	057	082	107	132	157	182	207	232	257	282	307	332	357	382	407	432	457	482
008	033	058	083	108	133	158	183	208	233	258	283	308	333	358	383	408	433	458	483
009	034	059	084	109	134	159	184	209	234	259	284	309	334	359	384	409	434	459	484
010	035	060	085	110	135	160	185	210	235	260	285	310	335	360	385	410	435	460	485
011	036	061	086	111	136	161	186	211	236	261	286	311	336	361	386	411	436	461	486
012	037	062	087	112	137	162	187	212	237	262	287	312	337	362	387	412	437	462	487
013	038	063	088	113	138	163	188	213	238	263	288	313	338	363	388	413	438	463	488
014	039	064	089	114	139	164	189	214	239	264	289	314	339	364	389	414	439	464	489
015	040	065	090	115	140	165	190	215	240	265	290	315	340	365	390	415	440	465	490
016	041	066	091	116	141	166	191	216	241	266	291	316	341	366	391	416	441	466	491
017	042	067	092	117	142	167	192	217	242	267	292	317	342	367	392	417	442	467	492
018	043	068	093	118	143	168	193	218	243	268	293	318	343	368	393	418	443	468	493
019	044	069	094	119	144	169	194	219	244	269	294	319	344	369	394	419	444	469	494
020	045	070	095	120	145	170	195	220	245	270	295	320	345	370	395	420	445	470	495
021	046	071	096	121	146	171	196	221	246	271	296	321	346	371	396	421	446	471	496
022	047	072	097	122	147	172	197	222	247	272	297	322	347	372	397	422	447	472	497
023	048	073	098	123	148	173	198	223	248	273	298	323	348	373	398	423	448	473	498
024	049	074	099	124	149	174	199	224	249	274	299	324	349	374	399	424	449	474	499
025	050	075	100	125	150	175	200	225	255	275	300	325	350	375	400	425	450	475	500

THIS FORM IS AN AMENDMENT TO YOUR SHIPPING DOCUMENTS. THE INFORMATION RECORDED ON THIS DOCUMENT WILL BE USED IN THE EVENT A CLAIM IS FILED.
CE FORMULAIRE EST UNE MODIFICATION DE VOS DOCUMENTS D'EXPÉDITION. LES RENSEIGNEMENTS QUI FIGUENT DANS LE PRÉSENT FORMULAIRE SERONT UTILISÉS DANS L'ÉVENTUALITÉ D'UNE DEMANDE D'IDÉMINTÉ.

NOTE: I UNDERSTAND AND AGREE THAT I HAVE PERSONALLY CHECKED OFF ALL NUMBERS RELATING TO THE ITEMS ON MY INVENTORY OF ARTICLES SHIPPED AND THAT THESE HAVE ALL BEEN DELIVERED INTO MY POSSESSION UNLESS OTHERWISE NOTED. ANY DAMAGE/SHORTAGE MUST BE RECORDED ON THIS DOCUMENT AND ON THE INVENTORY OF ARTICLES SHIPPED FORM IN THE "DELIVERY EXCEPTIONS" COLUMN AND ACKNOWLEDGED BY THE DELIVERING VAN OPERATOR OR THE CARRIER CAN BE DISCHARGED FROM LIABILITY. CONTACT ATLAS CANADA AT 1-800-713-4432 IF YOU EXPERIENCE DAMAGE AND/OR LOSS. ALL ITEMS DISMANTLED BY CARRIER AT ORIGIN HAVE BEEN REASSEMBLED AT DELIVERY TO MY SATISFACTION.

NOTA: JE COMPREND ET J'ACCEPTE PAR LA PRÉSENTE AVOIR PERSONNELLEMENT COCHÉ TOUS LES NUMÉROS RELATIFS AUX ARTICLES SUR L'INVENTAIRE DES ARTICLES EXPÉDIÉS ET QUE CEUX-CI M'ONT ÉTÉ LIVRÉS, À MOINS DE MENTION CONTRAIRE À CET EFFET. TOUS LES ARTICLES MANQUANTS OU ENDOMMAGÉS DOIVENT ÊTRE CONSIGNÉS SUR CE DOCUMENT ET SUR LE FORMULAIRE D'INVENTAIRE DES ARTICLES EXPÉDIÉS À LA COLONNE DES "EXCEPTIONS À LA LIVRAISON" ET CELA DOIT ÊTRE ATTESTÉ PAR LE CAMIONNEUR FAISANT LA LIVRAISON, AUTREMENT LE TRANSPORTEUR POURRAIT ÊTRE DÉCHARGÉ DE SA RESPONSABILITÉ. VEUILLEZ COMMUNIQUER AVEC ATLAS CANADA, 1-800-713-4432 SI VOUS CONSTATEZ DES DOMMAGES ET/OU DES PERTES. TOUS LES ARTICLES DÉMONTÉS PAR LE TRANSPORTEUR À L'ORIGINE ONT ÉTÉ REMONTÉS À MA SATISFACTION AU MOMENT DE LA LIVRAISON.

CUSTOMER SIGNATURE / SIGNATURE DU CLIENT:  DATE: Feb 26/23

EVERYTHING CHECKED OFF / LIVRAISON DE TOUS LES ARTICLES CONFIRMÉS / CUSTOMER TO INITIAL / CLIENT À ÉMARGER

THIS DOCUMENT HAS BEEN EXPLAINED AND PROVIDED PRIOR TO START OF UNLOAD / CE DOCUMENT A ÉTÉ EXPLIQUÉ ET FOURNI AVANT LE DÉBUT DU DÉCHARGEMENT.

SIGNATURE OF DELIVERING VAN OPERATOR:  ID CODE: 8999 AGENT CODE: 472

SIGNATURE OF DELIVERING VAN OPERATOR:  CODE D'IDENTIFICATION: 8999 CODE DE L'AGENT: 472

CUSTOMER INITIAL:  FORM 6405S 06/19

CUSTOMER / CLIENT



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ADDITIONAL SERVICES PERFORMED

- Used for additional services rendered that are not included on the estimate.
- If customer does not want a TV Carton or Mattress Bag, you must indicate in writing that the "customer elects no TV Carton or Mattress Bag". Both customer and PVO must sign.
- Please include items to be disassembled so the unloading agent is aware.

ADDITIONAL SERVICES PERFORMED

REGISTRATION NUMBER
[REDACTED]

CUSTOMER [REDACTED]

CUSTOMER NOTE: Additional services may require the assessment of extra charges. This form will accompany your shipment from origin to destination. Your initials in the appropriate boxes will indicate your agreement to the additional services performed at each point.

SPECIAL SERVICES		COMPLETED AT ORIGIN				COMPLETED AT DESTINATION		
1. MATTRESS BAGS	PROVIDED BY [REDACTED] PACKED BY [REDACTED]	SIZE OF BAG	SINGLE	DOUBLE	KING	QUEEN	CRIB	
2. STAIR CARRY CHARGE / ELEVATOR / LONG CARRY		CUSTOMER INITIALS [REDACTED]			CUSTOMER INITIALS [REDACTED]			
3. WAITING TIME / OVERTIME — HOURS FREE TIME ALLOTTED AGENT [REDACTED] AUTH BY [REDACTED] EXPLANATION [REDACTED] # OF WORKERS (WAITING TIME LABOUR) [REDACTED]	LOADING/UNLOADING ACTUALLY STARTED WAITING TIME COMPLETED WAITING TIME	AM/PM	DATE [REDACTED]	AM/PM	DATE [REDACTED]	AM/PM	DATE [REDACTED]	
		OT PACKING	YES [REDACTED] NO [REDACTED]	CUSTOMER INITIALS [REDACTED]	AGENT # [REDACTED]	OT UNPACKING	YES [REDACTED] NO [REDACTED]	
4. SHUTTLE SERVICE AGENT / PVO PROVIDING VEHICLE [REDACTED] AGENT PROVIDING SERVICE [REDACTED]		CUSTOMER INITIALS [REDACTED]			CUSTOMER INITIALS [REDACTED]			
5. MICRO FOAM ITEM: [REDACTED] DESCRIPTION [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] ITEM: [REDACTED] DESCRIPTION [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED]								
6. TV CARTON(S) MAKE/MODEL: [REDACTED] SIZE [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] MAKE/MODEL: [REDACTED] SIZE [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] MAKE/MODEL: [REDACTED] SIZE [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED]								
7. DISASSEMBLY (NON-STANDARD/SPECIALTY) ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED]		REASSEMBLY (NON-STANDARD/SPECIALTY) ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED] ITEM: [REDACTED] AGENT [REDACTED] CUST. INTL [REDACTED]						
8. MISCELLANEOUS SERVICES ORIGIN: CUST. INTL [REDACTED] CUST. INTL [REDACTED] CUST. INTL [REDACTED] CUST. INTL [REDACTED]		MISCELLANEOUS SERVICES DESTINATION: CUST. INTL [REDACTED] CUST. INTL [REDACTED] CUST. INTL [REDACTED] CUST. INTL [REDACTED]						
9. EXTRA PICK-UP ADDRESS: [REDACTED]		EXTRA DELIVERY ADDRESS: [REDACTED]						
10. CONFIRMATION OF DESTINATION SERVICES PROPER SET UP & REASSEMBLY COMPLETED BY VAN OPERATOR (INCLUDING BEDS). FINAL WALK THROUGH TO INSPECT FOR PROPERTY DAMAGE COMPLETED (ANY MOVING RELATED DAMAGES ARE NOTED ON INVENTORIES). "UNPACK SERVICES WERE OFFERED AND DECLINED"		CUST. INTL [REDACTED]						
11. SERVICES WAIVER Origin: I have advised the moving crew to: [REDACTED]		Destination: I have advised the moving crew to: [REDACTED]						
		CUST. INTL [REDACTED]						
		CUST. INTL [REDACTED]						
		CUST. INTL [REDACTED]						
		CUST. INTL [REDACTED]						
		CUST. INTL [REDACTED]						
CUST. INTL [REDACTED]		CUST. INTL [REDACTED]						
CUSTOMER HAS BEEN GIVEN A COPY OF THIS COMPLETED FORM MARKED AND INITIALED TO SHOW SERVICES PERFORMED.								
AGENT CODE [REDACTED]	DATE [REDACTED]	CUSTOMER INITIALS [REDACTED] DATE [REDACTED]						
I HAVE RECEIVED A COPY OF THIS FORM INITIALED BY ME TO AUTHORIZE PERFORMANCE OF SERVICES SPECIFIED. LOSS AND DAMAGE SHOULD BE INDICATED ON THE CUSTOMER CHECK-OFF SHEET.								



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CIVILIAN PACK/UNPACK REPORT

- Verify all information is completed properly.
- If the customer elects to not have their items unpacked at destination, please make sure to have them sign in the appropriate section.

CIVILIAN PACK/UNPACK SERVICES REPORT		
REGISTRATION NUMBER		
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THE FOLLOWING REPORT LISTS THE PACKING & UNPACKING SERVICES PERFORMED DURING YOUR MOVE. YOUR SIGNATURE BELOW CERTIFIES THAT THE COMPLETED REPORT REFLECTS THE SERVICES PROVIDED:		
ORIGIN		DESTINATION
CUSTOMER [REDACTED]	CUSTOMER [REDACTED]	
STREET [REDACTED]	STREET [REDACTED]	
CITY [REDACTED]	PROV. [REDACTED]	CITY [REDACTED]
TEL. NO. [REDACTED]	POSTAL CODE [REDACTED]	TEL. NO. [REDACTED]
CARTONS PROVIDED & PACKED BY AGENT		
ORIGIN		
DESCRIPTION	ESTIMATE	ACTUAL
CHINA CARTONS		
NO. 1.5 CARTON (1.5 CU. FT.)		
NO. 2 CARTON (2 CU. FT.)		
NO. 4 CARTON (4 CU. FT.)		
NO. 5 CARTON (5 CU. FT.)		
NO. 6 CARTON (6 CU. FT.)		
LAMPSHADE CARTON		
MIRROR CARTON (SMALL)		
MIRROR CARTON (LARGE)		
MATTRESS BAGS - SML (SINGLE)		
MATTRESS BAGS - SML (CRIB)		
MATTRESS BAGS - SML (DOUBLE)		
MATTRESS BAGS - SML (KING/QUEEN)		
WARDROBE CARTONS		
CRATES		
GUN CARTON		
TV CARTON		
OTHER		
OTHER		
Packed By [REDACTED]	Code: [REDACTED]	Date: [REDACTED]
DESTINATION		
DESCRIPTION	ACTUAL	
CHINA CARTONS		<input type="checkbox"/> CARTON PICK UP ONLY (MAY BE SUBJECT TO ADDITIONAL CHARGES)
NO. 1.5 CARTON (1.5 CU. FT.)		
NO. 2 CARTON (2 CU. FT.)		
NO. 4 CARTON (4 CU. FT.)		
NO. 5 CARTON (5 CU. FT.)		
NO. 6 CARTON (6 CU. FT.)		
LAMPSHADE CARTON		
MIRROR CARTON (SMALL)		
MIRROR CARTON (LARGE)		
MATTRESS BAGS - SML (SINGLE)		
MATTRESS BAGS - SML (CRIB)		
MATTRESS BAGS - SML (DOUBLE)		
MATTRESS BAGS - SML (KING/QUEEN)		
WARDROBE CARTONS		
CRATES		
GUN CARTON		
TV CARTON		
OTHER		
OTHER		
Unpacked By [REDACTED]	Code: [REDACTED]	Date: [REDACTED]
TO BE SIGNED BY CUSTOMER AT ORIGIN:		
I certify that the number of cartons indicated were packed by the carrier		
<input checked="" type="checkbox"/> Signature Of Customer Or His/Her Representative		
TO BE SIGNED BY CUSTOMER AT DESTINATION:		
The Packing Charges on the move include EITHER the packing, use of, and unpacking of the cartons, OR the packing and the cartons, (should I choose to complete the unpacking myself). It is understood that I am responsible for the disposal of packing materials, including cartons, that are not unpacked at the time of delivery.		
I have read the above notice, and confirm one of the following statements:		
1. Unpacking Services WERE PERFORMED <input checked="" type="checkbox"/> Signature of Customer or His/Her Representative		
2. I have chosen to unpack the cartons myself and to keep the cartons. <input checked="" type="checkbox"/> Signature of Customer or His/Her Representative		
ATLAS COPY - SCAN WITHIN 10 DAYS		
6415E 11/21		



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DAMAGE/LOSS REPORT

- The Damage/Loss Packed Item Report must be completed at origin and destination.
- Indicate at origin any pre-existing damage on items being packed.
- Avoid using “poorly packed” as a cause of damage. Be more specific in your reasoning such as, “damaged due to large item placed on top”.



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RESIDENCE LIABILITY WAIVER

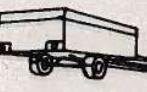
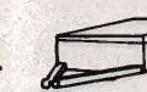
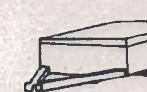
- Must be completed on all shipments at origin and destination.

 <p>485 North Service Road East Box 970, Lakeshore West PO Oakville, Ontario L6K 0C1 Tel. (905) 844-0701</p>		Residence and Property Liability Waiver / Résidence et propriété formulaire de renonciation aux dommages mobilier et immobilier					
Move Information / Informations de déménagement							
Customer Name / Nom du client:			Registration Number / Numéro d'enregistrement:				
Van Operator / Transporteur:		Driver ID / Agent et Code d'identité:		Date:			
Customer and Van Operator to review and Customer to Initial / A vérifier par le client et le transporteur				Origin / Origine	Destination		
				Pre-Load Pré-Chargement	Post-Load Après le Chargement	Pre-Delivery Pré-Déchargement	Post-Delivery Après le Déchargement
1. Customer and Van Operator have inspected residence prior to load/unload (doors, walls, floors, ceilings, exterior, driveway, elevator, lawn, etc). Any pre-existing damages have been brought to my attention. Le client et le transporteur ont inspecté l'état des lieux de la résidence avant le chargement / déchargement : (portes, murs, planchers, plafonds, extérieur, allée, ascenseur, pelouse, etc.) Les dommages existants ont été apportés à mon attention.				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. Customer and Van Operator have inspected after load/unload. No new property damage exists. Any new damages have been noted below and brought to the Van Operators attention. If noted, Atlas Canada, its agents and employees are released from liability. Le client et le transporteur ont inspecté les lieux après le chargement / déchargement. Aucun nouveau dommages ou dégradation à la propriété existe. Sinon, Atlas Canada, ses agents et employés sont exonérés de toute responsabilité.				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3. Customer and Van Operator have inspected the residence after load/unload and all items authorized for moving have been loaded/unloaded as requested. À la fin du chargement/déchargement le client et le transporteur ont examiné les résidence et on constaté que tous les articles à déménager ont été chargés/déchargés tel que convenu.				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
New Exceptions / Remarques							
Origin / Origine			Destination				
Damage Waiver Services requested and/or removal/placement of certain household items could result in damage to your residence that is beyond the control of the carrier. By signing below, you certify that you wish the services and/or removal/placement of property to proceed, with the full understanding that this will release Atlas Van Lines, its agents and its employees from any liability for loss and/or damage that may occur to your residence, property and household items.		Renonciation de responsabilité Les services demandés et/ou les articles à enlever ou à placer peuvent endommager votre résidence et ne peuvent être contrôlés par le transporteur et/ou ses agents. Votre signature ci-dessous, certifie que les services demandés et/ou articles à enlever et/ou placer, vous déchargez Atlas Van Lines, ses agents et de ses employés de toute responsabilité pour pertes ou dommages qui peuvent être causés à votre résidence, propriété ou vos articles.					
Customer Signature / Signature du client: _____ Date: _____							
FINAL SIGNATURE / SIGNATURE FINALE To be signed by Customer and Van Operator at the completion of the move / Pour signer à la fin des travaux							
Customer Signature / Signature du client: _____			Date: _____				
Van Operator Signature / Signature du transporteur: _____			Date: _____				

ATLAS OAKVILLE

RECREATIONAL VEHICLE REPORT

- Must be completed on shipments where a recreational vehicle is being transported.
- **Please Note:** The tag number can be noted on the inventory but this document should be used for pre-existing damages only.

RECREATIONAL VEHICLE CONDITION REPORT RAPPORT SUR L'ÉTAT DES VÉHICULES DE LOISIRS											
SHIP FROM / point d'expéditeur: CONSIGNEUR/ Expéditeur: _____ Street/ Adresse: _____ Province: _____ Notify/ Avenir: _____ Tel No./ Téléphone: _____						REGISTRATION # / N° D'ENRG: FOR TRANSPORTATION AND DELIVERY TO / pour transport et livraison à: CONSIGNEE/ Destinataire: _____ Street/ Adresse: _____ City/ Ville: _____ Province: _____ Notify/ Avenir: _____ Tel No./ Téléphone: _____					
CONDITION SYMBOLS / SYMBOLE POUR CONDITION											
1. - Broken - Brisé 2. - Burned - Brûlé 3. - Chipped - Écaillé	5. - Crushed - Écrasé 6. - Cracked or裂ing - 7. - Dentied - Endéch	8. - Faded - Décoloré 9. - Gouged - Entonnoi	11. - Rustied - Rouillé 10. - Loose - Desserre	13. - Missing - Manquant 14. - Bent - Pié	15. - Mildew - Moisi 16. - Soiled - Souillé	20. - Marked or Scratched - 21. - Frotte - Frotté	23. - Stained - Taché 24. - Split - Coupé	28. - Repaired - 25. - Warped - Déformé 22. - Tom - Déchiré	Previously - Réparé auparavant		
Mark Item Moved / Indiquer l'article déménagé: MOTORCYCLE Snowmobile Boat Trailer Motocyclette Motoneige Bateau Remorque:											
CONDITIONS ON LOADING / ETAT AU CHARGEMENT						EXCEPTIONS ON DELIVERY / EXCEPTIONS A LA LIVRAISON					
											
MAKE/MARQUE	YEAR/ANNÉE	MODEL/MODELÉ	MILEAGE/PARCOURS	CUST. INITIAL/ INIT. CLIENT	MAKE/MARQUE	YEAR/ANNÉE	MODEL/MODELÉ	MILEAGE/PARCOURS	CUST. INITIAL/ INIT. CLIENT		
<input type="checkbox"/> KM	<input type="checkbox"/> MILES	<input type="checkbox"/> KM	<input type="checkbox"/> MILES		<input type="checkbox"/> KM	<input type="checkbox"/> MILES	<input type="checkbox"/> KM	<input type="checkbox"/> MILES			
											
MAKE/MARQUE	YEAR/ANNÉE	MODEL/MODELÉ	MILEAGE/PARCOURS	CUST. INITIAL/ INIT. CLIENT	MAKE/MARQUE	YEAR/ANNÉE	MODEL/MODELÉ	MILEAGE/PARCOURS	CUST. INITIAL/ INIT. CLIENT		
<input type="checkbox"/> KM	<input type="checkbox"/> MILES	<input type="checkbox"/> KM	<input type="checkbox"/> MILES		<input type="checkbox"/> KM	<input type="checkbox"/> MILES	<input type="checkbox"/> KM	<input type="checkbox"/> MILES			
											
CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT							
											
CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT							
											
CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT		CUST. INITIAL/ INIT. CLIENT							
ORIGIN / ORIGINE	ADDITIONAL REMARKS / AUTRES REMARQUES				DESTINATION						
I ACKNOWLEDGE CONDITION ON LOADING AS DESCRIBED ABOVE J'ATTESTE DE L'ETAT AU CHARGEMENT "TEL QU'IL EST DÉCRIT CI-DESSUS"						RECEIVED IN THE SAME CONDITION EXCEPT AS NOTED IN "EXCEPTIONS ON DELIVERY" REÇU DANS LE MÊME ÉTAT SAUF TEL QU'INDIQUE À LA RUBRIQUE "EXCEPTIONS A LA LIVRAISON"					
CUSTOMER CLIENT			CUSTOMER CLIENT								
VAN OPERATOR CHAUFFEUR DU CAMION		I.D. CODE NO. IDENT.	VAN OPERATOR CHAUFFEUR DU CAMION		I.D. CODE NO. IDENT.						
AGENCY CODE CODE DE L'AGENT		DATE	AGENCY CODE CODE DE L'AGENT		DATE						
1) ATLAS - OAKVILLE 2) CUSTOMER AT ORIGIN/CLIENT À L'ORIGINE 3) DESTINATION AGENT AFTER LOADING/AGENT DE LA DESTINATION APRÈS CHARGEMENT 4) FINAL HAULER'S COPY/COPY DU DERNIER TRANSPORTEUR 6016 04-17											



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RECREATIONAL VEHICLE RIDER

- Must be completed by the crew when going in or out of warehouse/storage.

RECREATIONAL VEHICLE RIDER TO INVENTORY ANNEXE À L'INVENTAIRE DES VÉHICULES DE LOISIRS

NOTE: THIS RIDER IS ONLY FOR USE WITHIN OUR ORGANIZATION AND SHOULD NOT BE SHOWN TO THE CUSTOMER
NOTA: CETTE ANNEXE EST UNIQUEMENT RÉSERVÉE À L'USAGE INTERNE DE NOTRE ORGANISATION ET NE DOIT PAS ÊTRE MONTRÉE AU CLIENT

CUSTOMER / CLIENT:	REG. NO./ N° D'ENRG:
ORIGIN / ORIGINE:	DATE:
DESTINATION:	SHEET FEUILLE OF DE SHEETS FEUILLES

CONDITION SYMBOLS / SYMBOLS POUR CONDITION													
1. - Broken - Ense	5. - Crushed - Écrasé	8. - Faded - Décoloré	11. - Fuzzed - Rouillé	15. - Mildew - Moisi	20. - Marked or Scratched -	23. - Stained - Taché	26. - Repaired -						
2. - Burned - Brûlé	6. - Cracked or Lifting -	9. - Gouged - Enfoncé	13. - Missing - Manquant	18. - Soiled - Souillé	21. - Worm - Usé	24. - Split - Coupé	27. - Previously -						
3. - Chipped - Ecaillé	7. - Denting - Ebréché	10. - Loose - Déserré	14. - Bent - Plié	15. - Rubbed - Frotté	22. - Torn - Déchiré	25. - Warped - Déformé	28. - Repaired auparavant						

AGENT MAKING DELIVERY INITIAL
AGENT CHARGE DE LA LIVRAISON INITIALE

MAKE/MARQUE

YEAR/ANNÉE

MODEL/MODELE

MILEAGE/PARCOURS

KM MILES

AGENT MAKING DELIVERY INITIAL
AGENT CHARGE DE LA LIVRAISON INITIALE

MAKE/MARQUE

YEAR/ANNÉE

MODEL/MODELE

MILEAGE/PARCOURS

KM MILES

AGENT MAKING DELIVERY INITIAL
AGENT CHARGE DE LA LIVRAISON INITIALE

AGENT MAKING DELIVERY INITIAL
AGENT CHARGE DE LA LIVRAISON INITIALE

ADDITIONAL EXCEPTIONS / EXCEPTIONS SUPPLEMENTAIRES

AGENT MAKING DELIVERY / AGENT CHARGE DE LA LIVRAISON

AGENT ACCEPTING DELIVERY / AGENT ACCEPTANT LA LIVRAISON

Agent Name: _____ Agent No: _____ Agent Name: _____ Agent No.: _____
Signature: _____ Date: _____ Signature: _____ Date: _____



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GOVERNMENT

PRE-MOVE BOOKLET

- The Pre-Move Booklet will provide important information concerning the member's rights and responsibilities as they relate to their upcoming move.
- Must be provided to members on all Government moves.

TO OBTAIN A COPY, CONTACT THE PROCUREMENT DEPARTMENT:

Bryce Lawrence: can-procurement@atlasvanlines.ca **Call:** 1-800-968-3171



PRE-MOVE INFORMATION BOOKLET

23 July 2021

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GOVERNMENT

RECEIPT OF PRE-MOVE BOOKLET

- This document indicates the member acknowledges they received the Pre-Move Booklet and understands the responsibilities of themselves, the crew, and Atlas.
- The Claims Services team will reference document if there is a claim.
- Does not apply to NAV-Canada moves.

**Mandatory Acknowledgement Receipt for
Pre-Move Information Booklet**

**Accuse de reception obligatoire de la Trousee
de Renseignements Prealables au Demenagement**

Atlas Canada Head Office: 485 North Service Road East, Box 970, Lakeshore West PO, Oakville, ON L6K 0C1
Tel: 905-844-0701 - Toll free 800-713-4432 - email: cs@atlasvanlines.ca - www.atlascanada.com

Van Line Registration No./
No. d'enregistrement _____ Shipper Name/
Nom de l'expediteur: _____
Transporter

Origin Carrier Information/
Information Transporteur
Origine: _____ Carrier/Transporteur: _____ Tel: _____
City/Ville: _____ Fax: _____

Destination Carrier
Information/Information
Transporteur Destination: _____ Carrier/Transporteur: _____ Tel: _____
City/Ville: _____ Fax: _____

Origin City/
Ville d'origine: _____ Destination City/
Ville de destination: _____

I acknowledge receipt of this booklet and understand the information contained herein.
J'accuse reception de ce livret et comprends l'information contenue ci-incluse.

Federal Government Employee/
Employe du Gouvernement Federal: _____ Signature _____ Date _____

Agency Moving Consultant/
Consultant de l'agence: _____ Signature _____ Date _____

Agent: _____ Agency No/Code de l'agence: _____

Form 8804 - 04/2021 Copy 1 - Federal Government Employee/Employe du Government Federal
Copy 2 - Van Line/Transporteur



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GOVERNMENT

DISCONNECT & PREPARE BY SHIPPER

- This document outlines what the member will be responsible for in terms of disassembly or disconnection.

Atlas
Canada
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**Articles that must be disconnected
& prepared by the shipper**

Registration Number _____

It shall be the shippers responsibility to obtain proper packing materials as well as prepare the following items for shipment in accordance with the manufacturers specifications:

- 1 Outdoor articles such as steel utility cabinets/sheds up to 12'x12'x8', swing sets, slides, sky rides, jungle gyms, satellite dishes, hot tubs/spas, garden and patio furniture, and other outdoor apparatus of a similar nature, (including boats and watercraft), must be cleaned, disconnected, drained, and disassembled at origin and re-assembled and connected at destination. Items must be able to fit inside a normal conveyance;
- 2 Outdoor articles embedded in the ground or secured to a building must be removed or detached and cleaned.
- 3 Ensure the Contractor has unrestricted access to the item(s) by removing the obstacles preventing this unrestricted access, (e.g. - If the area is enclosed by a fence, the gate must be of adequate size to provide unrestricted access or a portion of the fence must be removed).
- 4 If unable to give unrestricted access, the shipper will move the item(s) to a location that provides unrestricted access to the Contractor, such as the curb side of the residence.
- 5 If a hot tub/spa cannot be turned onto its side to be moved because it will damage the tub or skirt, the shipper is responsible for the cost to move the hot tub/spa to a location that allows the Contractor to move it level, such as the curbside of the residence.
- 6 Ensure hot tubs/spas are serviced as per manufacturer's specifications, (this includes draining of water lines and pumps).
- 7 Ensure appliances and electronic equipment available for preparation for shipping and certification.

Items that will require the Federal Government Employee to disconnect, drain, clean, and disassemble:

Agent Name: _____ Agent Number: _____

Moving Consultant: _____ Date: _____

(Signature)

Atlas Canada - 485 North Service Road East, Oakville, ON L6H 1A5 www.atlasvanlines.ca

Copy 1 - Federal Government Employee
Copy 2 - Final Delivery Driver
Copy 3 - Van Line

Form 8805 - 04/2021



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GOVERNMENT

HIGH VALUE INVENTORIES

- Member must complete this document with their appropriate items.
- Written appraisal must be included as liability is limited to actual value.

GOVERNMENT OF CANADA/GOUVERNEMENT DU CANADA HIGH VALUE ITEMS INVENTORY/INVENTAIRE DES ARTICLES DE GRANDE VALEUR					
SHIPPER NAME/NOM DE L'EXPÉDITEUR:		TAG COLOUR/COUL D'ÉTIQ		TAG LOT NO. / NUMÉRO DE LOT D'ÉTIQUETTE	
REGISTRATION NO/NO D'ENREGISTREMENT		O A/AGENT D'ORIGINE		DA/AGENT DE DESTINATION:	
INVENTORY TAG NO. NO D'ÉTIQUETTE D'INVENTAIRE	ITEMS ARTICLES	PACKER BOX NO. / NO. DE BOÎTE-EMBALLAGE	MAKE MARQUE	MODEL MODÈLE	
	Computer System Unit/Unité principale d'ordinateur (CPU)				
	Computer Monitor/Écran de moniteur				
	Computer Scanner/Module de balayage				
	Satellite Rec/Dish				
	Computer printer/Imprimante d'ordinateur				
	Tablet/Tablette				
	Laptop/Ordinateur portable				
	Stereo Receiver/Récepteur stéréo				
	Amplifier/Amplicateur				
	Speakers/Haut-parleurs				
	Home Theatre System/Théâtre de maison				
	CD Player/Lecteur de CD #CD's				
	Television/Téléviseur				
	Camera/Caméra 35mm <input type="checkbox"/> Digital/Numérique <input type="checkbox"/>				
	DVD Player/Lecteur DVD DVD'S#				
	Video games system/Système de jeux vidéo #of games/#jeux				
	MP 3 Player/Lecteur de MP 3 / I Pod				
Other valuable items where value exceeds \$5000. Autres morceaux d'une valeur excédant 5000\$.					
Items falling into these categories valued in excess of \$5000 must be supported by written appraisals. Les articles de cette catégorie dont la valeur est supérieure à 5000\$ doivent être accompagnés d'une évaluation écrite à l'appui. Note: Refer to section "Items of Special or Extraordinary Value" Note: Veuillez vous référer à la section "articles de valeur spéciale ou extraordinaire"					
ORIGIN/ORIGINE:		DESTINATION/DESTINATION:			
PACKING AGENT SIGNATURE SIGNATURE DE L'AGENT D'EMBALLAGE		DELIVERY VAN OPERATORS SIGNATURE SIGNATURE DU CAMIONNEUR À LA LIVRAISON			
AGENCY NAME/AGENCE CODE D'AGENCE		AGENCY CODE CODE D'AGENCE			
OWNERS SIGNATURE/SIGNATURE DU PROPRIÉTAIRE		OWNERS SIGNATURE/SIGNATURE DU PROPRIÉTAIRE			
DATE					
LOADING AGENT COPY. IF NECESSARY, COMPLETE AND SIGN MORE THAN ONE HVI FORM. SI NÉCESSAIRE, Veuillez COMPLÉTER ET SIGNER PLUS D'UN FORMULAIRE HVI (IAGV).					
FORM 8801 REV. 04/2021					
PAGE _____ OF/DE _____					



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GOVERNMENT

SERVICING OF ELECTRICAL

- This document outlines the electrical, electronic, and mechanical equipment/appliance that are to be serviced and certified.
- This document is to be checked-off by the member.

**FEDERAL GOVERNMENT SERVICING & CERTIFICATION OF ELECTRICAL,
ELECTRONIC & MECHANICAL EQUIPMENT & APPLIANCES**
**GOVERNEMENT FEDERAL PREPARATION & CERTIFICATION DES
APPAREILS ELECTRONIQUES, MECANIQUES & ELECTROMENAGERS**

Van Line Registration No./
No. d'enregistrement _____
Transporteur _____

Shipper Name/
Nom de l'expéditeur: _____

ORIGIN/ORIGINE
NAME/NOM _____
ADDRESS/ADRESSE _____
CITY/VILLE _____ PROV. _____
CONTACT _____

DESTINATION
NAME/NOM _____
ADDRESS/ADRESSE _____
CITY/VILLE _____ PROV. _____
CONTACT _____

HOME/MAISON **WORK/BUREAU** **HOME/MAISON** **WORK/BUREAU**

AUTHORIZED SERVICE (check where applicable) / SERVICE AUTORISÉ (caché si applicable):
NOTE: Servicing by mover does not include disconnect/reconnect / NOTE: Service par le déménageur n'inclut pas déconnexion ou reconnexion

**APPLIANCES/ELECTRONIC/MECHANICAL ITEMS EXCESS \$100 IN VALUE
ARTICLES ELECTROMÉNAGERS/ÉLECTRONIQUES/MÉCHANIQUES AVEC UNE VALEUR DE 100\$ ET PLUS**

<input type="checkbox"/> Dishwasher/Lave-vaisselle - built-in/encastré - portable _____	<input type="checkbox"/> CPU/Diskdrive/ Ordinateur/Disque Dur Keyboard/clavier Lecteur/Ordinateur portable _____	<input type="checkbox"/> Amplifier/Amplicateur DVD Player/Lecteur DVD Etiqueteuse/étagère Mini Stereo/Mini-chains Sub Woofer/ Haut-parleur de grave Speaker/Haut-parleurs #: _____	OTHERS / AUTRES
<input type="checkbox"/> Dryer/Sècheuse- Elect./élect. Dryer/Sècheuse-Gaz/Gaz	<input type="checkbox"/> Monitor/Monitor Printer/Imprimante Scanner/Numériseur Camera Equipment/Équipement de photographie: 35 ^{mm} Digital/Numérique: _____	<input type="checkbox"/> Turnier/Tuner Tournetable/Tourne disque	_____
<input type="checkbox"/> Freezer/Congélateur	<input type="checkbox"/> Clock-Grand/Horloge- G.P.	<input type="checkbox"/> TV/Féliciteur #: _____	_____
<input type="checkbox"/> Fridge/Réfrigérateur	<input type="checkbox"/> Dehumidifier/ Deshumidificateur	<input type="checkbox"/> Vidéo games system/Système de jeux vidéo	_____
<input type="checkbox"/> Fridge with ice maker/Réfrigérateur avec distributeur de glace	<input type="checkbox"/> Elect. Exercise Equip./Équipement d'exercice électrique	<input type="checkbox"/> Treadmill/Tapis de course	ITEMS REQUIRING MICRO FOAM/ ARTICLES NÉCESSITANT LA MICRO-MOUSSE
<input type="checkbox"/> Microwave/Four à micro-ondes	<input type="checkbox"/> Power Tools/Outils électriques Receivers/Récepteurs #: _____	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Stove Elect / Cuisinière Elect.		<input type="checkbox"/> _____	_____
<input type="checkbox"/> Stove Gas/ Cuisinière au gaz		<input type="checkbox"/> _____	_____
<input type="checkbox"/> Vacuum/Aspirateur		<input type="checkbox"/> _____	_____
<input type="checkbox"/> Top load washer/ Laveuse normale (remplis du haut)		<input type="checkbox"/> _____	_____
<input type="checkbox"/> Front load washer/ Laveuse frontale (remplis du devant)		<input type="checkbox"/> _____	_____
Make/Mark _____ Blocking _____ presence of de- barras présente _____	<input type="checkbox"/> Yes/Oui <input type="checkbox"/> No/Non	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Faxed by: Télécopié par: _____	Agent/Agence: _____	Date faxed/Date faxée: _____	_____
Fax/Télécopieur: _____		Phone/Téléphone: _____	_____
City/Ville: _____		Agent Code/Code d'agence: _____	_____

I, the undersigned, acknowledge and agree that certification and servicing must be completed to the above noted items in accordance with Federal Government Insurance Contract and the Carrier's Requirements.
Je reconnaît que les items ci-dessus doivent être préparés et certifiés en conformité avec les termes de l'entente entre le gouvernement fédéral et le transporteur.

NOTE/REMARQUE: The above items must be made accessible for the contractor's technician/Les items ci-haut mentionnés doivent être disponibles pour une inspection par le technicien

**CUSTOMER OR REPRESENTATIVE / SIGNATURE DE
L'EXPÉDITEUR OU SON REPRÉSENTANT**

**CARRIER REPRESENTATIVE/
SIGNATURE DU TRANSPORTEUR**

DATE/DATE

1) Fax to third party company. Origin agent scans to Atlas
Técopié à la compagnie ou tiers. L'agent d'origine numérisé vers Atlas

2) Shipper's Copy
Copie d'expéditeur

FORM 8803 - 04/21



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GOVERNMENT

CERTIFICATION REPORT

- Provide document to technician who will certify all items checked-off.

CERTIFICATION REPORT BY RAPPORT DE CERTIFICATION PAR:				
ITEM / ARTICLE	MAKE / MARQUE	MODEL / MODÈLE	MC OK / CONDITION MÉC. BEIN	MC UK (IF SO WHY?) CONDITION INCONNUE (POURQUOI?)
WASHER / LAVEUSE Top Load _____ / Chargement par le haut _____ Front load (if required) _____ / Chargement frontal (ensemble d'installation requis) _____				
DRYER / SÈCHE-LINGE Electric _____ / Électrique _____ Gas _____ / Gaz _____				
REFRIGERATOR / RÉFRIGÉRATEUR Ice/Water - yes _____ no _____ / Glace/Eau - oui _____ non _____				
STOVE / CUISINIÈRE Electric _____ / Électrique _____ Gas _____ / Gaz _____				
FREEZER / CONGÉLATEUR				
MICROWAVE / FOUR À MICRO-ONDES				
TV'S / 1. TÉLÉVISIONS 2. 3.				
HD/SD DRIVE-LAP TOP / DISQUE DUR-ORDINATEUR PORTABLE				
VACUUM / ASPIRATEUR				
ELEC. EXERCISE EQUIP / EQUIPEMENTS D'EXERCICE ÉLECTRIQUE				
PORTABLE DISHWASHER LAVI-VAISSELLE PORTATIVE				
AMPLIFIER (RECEIVER) AMPÉIFICATEUR				
SPEAKER HAUT-PARLEURS				
BLU-RAY/CDDVD VCR PLAYER LECTEUR (BLU-RAY/CDDVD/MAGNÉTOSCOPE)				
CABLE BOX/SATELLITE RECEIVER CÂBLE NUMÉRIQUE/RECEPTEUR SATELLITE				
COMPUTER/CPU ORDINATEUR				
MONITOR / MONITEUR				
PRINTER/SCANNER IMPRIANTE/NUMERISEUR				
LAPTOP/NOTEBOOK/TABLET ORDINATEUR PORTATIF/TABLETTE				
GAME SYSTEM Système de Jeux				
COMMENTS / COMMENTAIRES: _____				
TECH. NAME (PLEASE PRINT): NOM DU TECH. (SVP ÉCRIRE EN LETTRE MOULÉE), CUSTOMER SIGNATURE: SIGNATURE DU CLIENT:	TEL: _____			
DATE COMPLETED: DATE COMPLÉTÉE:				
<small>1. Atlas Van Lines copy Copie d'Atlas Van Lines</small> <small>2. Customer copy Copie du client</small> <small>3. Packing agent copy Copie de l'agent à l'emballage</small> <small>4. Loading agent copy Copie de l'agent au chargement</small>				



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GOVERNMENT

PACK/UNPACK REPORT

- The Government Pack/Unpack Report is listed by room.
- Ensure all information is completed properly.
- If the customer elects to not have their items packed at origin or unpacked at destination, please make sure they sign the appropriate section.

	FEDERAL GOVERNMENT PACK/UNPACK SERVICES REPORT		REGISTRATION NUMBER [REDACTED]
Go new places.			
THE FOLLOWING REPORT LISTS THE PACKING & UNPACKING SERVICES PERFORMED DURING YOUR MOVE. PLEASE EXAMINE CAREFULLY! YOUR SIGNATURE IN THE APPROPRIATE SECTIONS WILL CERTIFY THAT THE COMPLETED REPORT CORRECTLY REFLECTS THE PERFORMANCE OF THE SERVICES LISTED BELOW:			
ORIGIN		DESTINATION	
CUSTOMER [REDACTED]	CUSTOMER [REDACTED]	STREET [REDACTED]	STREET [REDACTED]
STREET [REDACTED]	PROV: [REDACTED]	CITY [REDACTED]	PROV: [REDACTED]
CITY [REDACTED]	POSTAL CODE: [REDACTED]	TEL. NO. [REDACTED]	POSTAL CODE: [REDACTED]
CARTONS PROVIDED & PACKED BY AGENT			
ORIGIN			
DESCRIPTION	ESTIMATE	ACTUAL	
CHINA CARTONS			
NO. 1.5 CARTON (1.5 CU. FT.)			
NO. 2 CARTON (2 CU. FT.)			
NO. 4 CARTON (4 CU. FT.)			
NO. 5 CARTON (5 CU. FT.)			
NO. 6 CARTON (6 CU. FT.)			
LAMPSHADE CARTON			
MIRROR CARTON (SMALL)			
MIRROR CARTON (LARGE)			
MATTRESS BAGS - 5ML (SINGLE)			
MATTRESS BAGS - 5ML (CRIB)			
MATTRESS BAGS - 5ML (DOUBLE)			
MATTRESS BAGS - 5ML (KING/QUEEN)			
WARDROBE CARTONS			
CRATES			
GUN CARTON			
TV CARTON			
OTHER			
OTHER			
I certify that the total number of cartons indicated above, were packed by the carrier. - Consignor or Representative Signature: [REDACTED]			
Packed By: [REDACTED]	I.D. Code: [REDACTED]	Agent Code: [REDACTED]	Date: [REDACTED]
DESTINATION UNPACKING			
DESCRIPTION	ACTUAL	PLEASE READ CAREFULLY. SHIPPER OR HIS/HER DESIGNATED REPRESENTATIVE MUST SIGN THE APPLICABLE STATEMENT PERTAINING TO UNPACKING SERVICES.	
CHINA CARTONS		I hereby certify that one of the following statements for unpacking services by the carrier applies:	
TV CARTON		Date: [REDACTED] Shipper/or his/her designated representative's signature	
NO. 1.5 CARTON (1.5 CU. FT.)		(1) [REDACTED]	
NO. 2 CARTON (2 CU. FT.)		(2) [REDACTED]	
NO. 2 CARTON (2 CU. FT.) - HEAVY		(3) [REDACTED]	
NO. 4 CARTON (4 CU. FT.)			
NO. 5 CARTON (5 CU. FT.)			
NO. 6 CARTON (6 CU. FT.)			
LAMPSHADE CARTON			
MIRROR CARTON (SMALL)			
MIRROR CARTON (LARGE)			
MATTRESS BAGS - 5ML (SINGLE)			
MATTRESS BAGS - 5ML (CRIB)			
MATTRESS BAGS - 5ML (DOUBLE)			
MATTRESS BAGS - 5ML (KING/QUEEN)			
WARDROBE CARTONS			
CARTON NON-STANDARD - SMALL			
CARTON NON-STANDARD - MEDIUM			
CARTON NON-STANDARD - LARGE			
CARTON FILING			
GUN CARTON			
SET-UP CARTON			
CRATES			
OTHER			
Reason total or partial unpack was not performed and/or comments:			
Packed By: [REDACTED]	I.D. Code: [REDACTED]	Agent Code: [REDACTED]	Date: [REDACTED]
ATLAS COPY - SCAN WITHIN 10 DAYS			
FORM 6228 05/22			



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GOVERNMENT

UNPACKING CERTIFICATION

- Mandatory on all government moves at destination to be completed at unpack.

		Contract No. - No du Contrat EN578-221811/002/ZU
		Order Number/Numéro de commande
		Registration No. - No D'enregistrement
UNPACKING CERTIFICATION / CERTIFICATE DE DÉBALLAGE		
IMPORTANT: This certificate must be complete and signed at destination Le présent certificat doit être complété et signé à destination		
ORIGIN/ORIGINE		DESTINATION
CUSTOMER/CLIENT		CONSIGNEE/DESTINATAIRE
STREET/RUE		STREET/RUE
CITY/VILLE	PROV	CITY/VILLE
To be signed by Customer AT DESTINATION		À signer par le client À DESTINATION
"Notice to Customer"		"Avis au client"
1. Unpacking was performed, as requested.		1. Le déballage a été effectué, tel que demandé.
Signature of Customer or Authorized Representative	Date	Signature du client ou de son représentant
Signature of Carrier		Signature du transporteur
2. Unpacking services were not performed, as requested.		2. Le déballage n'a pas été effectué, tel que demandé.
Signature of Customer or Authorized Representative	Date	Signature du client ou de son représentant
Signature of Carrier		Signature du transporteur
3. Unpacking services were not performed, despite my request for them, (state reason below).		3. Les services de déballage n'ont pas été effectués malgré mes demandes. (Veuillez indiquer la raison ci-dessous).
Signature of Customer or Authorized Representative	Date	Signature du client ou de son représentant
Signature of Carrier		Signature du transporteur



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GOVERNMENT

INVENTORIES

- Mandatory on all government shipments.
- The Government Inventories document is often used in coordination with the Civilian BINGO.

Please Note: If the BINGO is used, the PVO must also walk customer through this inventories document, check-off each item, and sign.

- The Government does **NOT** recognize our BINGO.

SCAN TO ATLAS WITHIN 10 DAYS FROM DATE OF DELIVERY
SCANNER À ATLAS DANS 10 JOURS DU DATE DE LIVRAISON