



CARRIER RATE
CONFIRMATION

Load Number: 29546359



GENERAL CONTACT

GTZ CONTACT: (866) 275-1407 xavier.jones@globaltranz.com
GTZ FAX:

CARRIER PAYMENTS:

INVOICE/POD/RATE CON submit to: TLINVOICES@globaltranz.com
NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

PO#: 1164193
REF#: 1164193
PRO#:
CARRIER QUOTE:

SERVICE: SERVICE TYPE: Full TRAILER TYPE: Van SIZE: 53	ACCESSORIAL(S):	COMMODITY: DESCRIPTION:Flooring WEIGHT: 43500 lbs PALLETS:26 PIECES:26
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CARRIER INFORMATION: CARRIER NAME: BRZ LEGAL NAME:RIKI TRANSPORTATION INC. MC#:086875 [CA458]	DISPATCHER: Smith PHONE: (708) 852-5556 FAX: EMAIL: smith@rtbrz.com	DRIVER: Gonzalez DRIVER PHONE: (305) 726-3148 TRAILER NUMBER:251825
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IMPORTANT LOAD NOTES:

ORIGIN: FACILITY: metropolitan hardwood floors STREET: 8106 S 216th St CITY/STATE/ZIP: Kent, WA 98032 FAX: PICKUP NOTES: Driver must take a photo of the seal on the trailer doors prior to departing the shipper.	PICKUP DATE: 09-03-2024 REF #: HOURS: 08:00 - 15:00 CONTACT: jay PHONE: (253) 479-3919	PICKUP #: APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
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DESTINATION: FACILITY: Metropolitan Hardwood Floors STREET: 12115 Centennial Rd, Unit 102 CITY/STATE/ZIP: La Vista, NE 68128 FAX: DELIVERY NOTES:	DELIVERY DATE: 09-06-2024 HOURS: 08:00 - 16:00 CONTACT: Ian Lea PHONE: (402) 218-2035	REF #: DELIVERY#: APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
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RATE INFORMATION:
BASE RATE:\$3,000.00
TOTAL RATE: \$3,000.00

GTZ SIGNATURE : PHX - Xavier Jones (866) 275-1407

CARRIER SIGNATURE :

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce provision of this agreement, rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement or the Carrier's Carrier Rate Confirmation, the Agreement shall govern and then any terms as set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match the Rate Confirmation. Broker does not authorize hand written or verbal changes to the rate confirmation. If this rate confirmation does not accurately reflect the load terms, carrier must obtain a revised rate confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in additional line haul deductions.



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To be eligible for Accessorials / Incidentals, Carrier must:

- Be checked in to shipper **OR** receiver by the appointment time.
- Submit all proof of detention, accessorial, incidentals within 24-48 hours of delivery.

Detention:

- Carrier must be on time for pickup/delivery.
- Detention accrual begins 2 hours after appointment time at shipper/receiver IF:
 - Carrier must notify Broker after **60** minutes of waiting.
 - Provide time stamped BOL within 48 hours of delivery.
- Detention Rate - **\$40/hr** after **2** hours. Max \$200 detention per stop.

Layover, Truck Order Not Used (TONU):

- Carrier must contact Broker to request
- Delays or cancellations must be confirmed by Broker
- Layovers: \$200 Dry Van or \$250 Running Reefers.
- TONU: \$200

Submitting Payments:

- Email Invoice, Rate Confirmation, Proof of Delivery & Receipts to TLinvoices@globaltranz.com
- 3% / 3-Day Quick Pay available upon request
- For Payments question contact aptrrequests@globaltranz.com or by calling 866-275-1407 ext. 72597



INVOICE

BILL TO:

GLOBALTRANZ ENTERPRISES LLC
2700 COMMERCE ST STE 1500
DALLAS, TX 75226

INVOICE DATE: 09/05/2024**INVOICE #:** 29546359**TERMS:** NET 30**DUE DATE:** 10/05/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/03/2024		8106 S 216th St, Kent, WA 98032, USA - 12115 Centennial Rd, La Vista, NE 68128, USA			
		Freight Income	1	\$3,000.00	\$3,000.00

TOTAL

\$3,000.00

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below.

Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC**P.O.BOX 205154****DALLAS, TX 75320-5154****Tel: 844-899-8092**

Straight Bill of Lading - Short Form - Original - Not Negotiable

GLOBALTRANZ

GTZ BOL NO : 29546359

Shipper metropolitan hardwood floors
 Address 8106 S 216th St
 Kent, WA 98032
 Country USA
 Contact Name jay
 Phone Number (253) 479-3919
 Contact Email
 Fax Number

Carrier : BRZ
 Shipment Date: 09/03/24
 Carrier Pro# :
 Ref # : 1164193
 Carrier Quote # :
 P/O # : 1164193
 Customer BOL NO:

Shipment # 1164193



Seal # 02310434

Consignee Metropolitan Hardwood Floors
 Address 12115 Centennial Rd
 Unit 102
 La Vista, NE 68128
 Country USA
 Contact Name Ian Lea
 Phone Number (402) 218-2035
 Contact Email
 Fax Number

Third Party Billing Information:
 All charges are prepaid to:
 GlobalTranz
 PO Box 6348
 Scottsdale AZ 85261
 Direct billing inquiries to : (866) 275-1407
 GTZ BOL NO : 29546359

Comments/Special Instructions:

If a reefer is used it must NOT be turned on at any time while in transit.

Pickup Remarks :

Driver must take a photo of the seal on the trailer doors prior to departing the shipper.

Delivery Remarks :

Pallets	Pieces	IsHazard	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
26	26		Flooring	43500	0	0	0	0		false

The authorized signatories signing this document on behalf of its company consents and bind its company to the terms and conditions found on www.carrierrate.com.

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature:

Danillee

Date: 9/3/2024

Trailer#: 251825

Driver's Signature:

Date:

Trailer#:

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Consignor's Signature:

Consignee Signature:

Company Name:

MHF

Print Name:

IAN LEA

Date:

9/5/24

Permanent post-office address of the Shipper:

* Mark with "X" to designate material as defined in Title 49 CFR

Delivery # 5798901, 5803537, 5803887

