

Rate Confirmation Agreement for Trident Transport, LLC

- No Double Brokering allowed. Please send Invoices to <u>accounting@tridenttransport.com</u>
- No additional charges will be paid without prior approval.
- Accessorials must be reported at the time of shipment prior to departure.
- We require exclusive use of the trailer.
- NO CO-MINGLING ALLOWED unless otherwise specified on the rate confirmation.
- BY SIGNING THIS DOCUMENT, YOU ARE AGREEING TO OUR TERMS.

Trident Transport, LLC 505 Riverfront Parkway Chattanooga, TN 37402 (423) 805-3705



Trident Transport, LLC 505 Riverfront Pkwy Chattanooga, TN 37402

Page

t.

423-805-37		23-805-3701			oad Confir			075757
Carrier:		AL3 INC				Contact:	RIKI KOVACEVIC	
	CHIC		IL 60638			Phone:	630-485-7370	
Date:	10/17/2024				Fax:			
Order	Orde	er: 0757	577			Commodity:	Electrical Transformer	
	Miles: 371.0				Weight: 10	10641.0		
	Tem	p:				Trailer:	Van (DAT)	
	Case	es/pieces:	2			Reference:	1882441	
	BOL	: PS S	24-105, PS S24-106	1		Order Type;	TL	
	PU 1	Name: Address:	Miami Transformer 13935 SW 252 St	s Sei	vice	Date	10/17/2024 1300 10/17/2024 1500	
		Address.	13933 300 232 31			Contact:	Main	
		Phone:	HOMESTEAD 305-257-1492	FL	33032	Driver Loa	d: No driver loading or	unload
		Name	Magic Transport, Ir	nc		Date:	10/18/2024 0900	
		Address:	13286 Vantage Wa				10/18/2024 1400	
			a	- a		Contact:	Lashawn King	
			JACKSONVILLE	FL	32218	Driver Loa	•	unload
		Phone:	904-741-3988					
Payment		Carrier Fr	eight Pay:		\$475.00			
		Total Carrier Pay:		\$475.00				

TRIDENT

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded. Need full 53' Van. PU/DEL Times are firm.

Please Sign: BonnieR

(X) Accepť

() Decline

Attention:

Alec Rudh 763-200-7145 alec.rudh@tridenttransport.com Driver Name: Lukeson Driver Cell: (463) 267-8710 Driver Email: Tractor #: Trailer #: Tractor VIN: H03261







BILL TO: TRIDENT TRANSPORT LLC 505 RIVERFRONT PKWY CHATTANOOGA, TN 37402 INVOICE DATE: 10/18/2024 INVOICE #: R61819 TERMS: NET 30 DUE DATE: 11/18/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/17/2024		13935 SW 252 St, Homestead, FL 33032 - 13286 Vantage Way, Jacksonville, FL 32218			
		Freight Income	1	\$475.00	\$475.00

TOTAL	
\$475.00	

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

TRIDENT

Bill of Lading

Load Inform	nation				
LOAD NUMBER	3: 0757577	BOL NUMBER:			
SHIP DATE:	10/17	DELIVERY:	10/18		
O NUMBER:	PS S24-105, PS S24-106	OTHER REF#:	1882441		
Shipper		Consignee	Consignee		
AME:	Miami Transformers Service	NAME:	Magic Transport, Inc.		
13935 SW 252 St HOMESTEAD, FL 33032		ADDRESS:	13286 Vantage Way JACKSONVILLE, FL 32218		
3rd Party I	Billing	Transporta	tion Company Daron	Danzy	
NAME:	Trident Transport, LLC	NAME:	ROYALSINC Paulament's		
Load Detai	ils	c	2 eavipment's		
PCS: LBS: 2 1064	and an and the second second second second second		TYPE: NFMC: HM: CLASS:		
TOTAL PCB TOTAL L	L.S. C.O.D AMOUNT (US\$)	C.O.D FEE:	DECLARED VALUE:		
IF AT CONSIG	GNOR'S RISK, WRITE HERE OR	STAMP HERE:	EMERGENCY PHONE #:		
NOTES:					
Acknowled	dgement / Agreement				
DATE & TIME		# OF PIECES R	ECEIVED:		
SHIPPER:		PER CONTACT	NAME:		
CARRIER:		PER CONTACT	NAME:		

CEIVED:

SIGN HERE:

cs Scanned with CamScanner

CONSIGNEE: DATE & TIME: