** Freight RFQ Template**

YOUR COMPANY LOGO

CONTACT INFORMATION

|  |  |
| --- | --- |
| COMPANY NAME |  |
| CONTACT NAME |  |
| ADDRESS |  |
| EMAIL |  |
| PHONE |  |

ORIGIN

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NO. | CITY | STATE | ZIP | LOADING TYPE |
| 1 |  |  |  | [x]  | DOCK |[x]  GROUND |
| 2 |  |  |  |[ ]  DOCK | [x]  | GROUND |
| 3 |  |  |  | [x]  | DOCK |[ ]  GROUND |
| 4 |  |  |  |[ ]  DOCK |[ ]  GROUND |
| 5 |  |  |  |[ ]  DOCK |[ ]  GROUND |
| 6 |  |  |  |[ ]  DOCK |[ ]  GROUND |

DESTINATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NO. | CITY | STATE | ZIP | LOADING TYPE | DESTINATION TYPE |
| 1 |  |  |  |[x]  DOCK |[ ]  GROUND |[ ]  BUSINESS |[ ]  RESIDENTIAL |[ ]  JOBSITE |
| 2 |  |  |  |[ ]  DOCK |[x]  GROUND |[ ]  BUSINESS |[x]  RESIDENTIAL |[ ]  JOBSITE |
| 3 |  |  |  |[x]  DOCK |[ ]  GROUND |[ ]  BUSINESS |[ ]  RESIDENTIAL |[x]  JOBSITE |
| 4 |  |  |  |[ ]  DOCK |[ ]  GROUND |[ ]  BUSINESS |[ ]  RESIDENTIAL |[ ]  JOBSITE |
| 5 |  |  |  |[ ]  DOCK |[ ]  GROUND |[ ]  BUSINESS |[ ]  RESIDENTIAL |[ ]  JOBSITE |
| 6 |  |  |  |[ ]  DOCK |[ ]  GROUND |[ ]  BUSINESS |[ ]  RESIDENTIAL |[ ]  JOBSITE |

LOAD INFORMATION

|  |  |
| --- | --- |
| CLASS |  |
| NO. OF PIECES |  |
| TOTAL WEIGHT |  |
| STACKABLE | [ ]  YES [ ]  NO |
| PHONE |  |
| LOAD TYPE |
|[ ]  Pallets |
|[ ]  Bundles |
|[ ]  Boxes |
|[ ]  Crates |
|[ ]  Other: |
| TOTAL FOOTAGE NEEDED |  |
| OVERSIZE | [ ]  YES [ ]  NO |
| DIMENSIONS |  |
| EQUIPMENT REQUIRED |
|[ ]  Unknown |
|[ ]  Dry van |
|[ ]  Refrigerated van |
|[ ]  Heated van |
|[ ]  Straight truck |
|[ ]  Flatbed truck |
|[ ]  Step deck trailer |
|[ ]  Other: |
| ADDITIONAL REQUIREMENTS |
|[ ]  Straps / Bars |
|[ ]  Blanket wrapped |
|[ ]  Hazardous |
|[ ]  Logistics required |
|[ ]  Power tailgate |
|[ ]  Other: |
| SERVICE TYPE |
|[ ]  Less than truckload (LTL) |
|[ ]  Truckload |
|[ ]  Expedited |
|[ ]  Team driver |
|  |  |
|  |  |
| TEMPERATURE (if applicable) |  |

ADDITIONAL INFORMATION

|  |  |
| --- | --- |
| SHIPMENT PICKUP DATE | Estimated: MM/DD/YY | Actual: MM/DD/YY |
| DESCRIPTION OF GOODS |  |
| PAYMENT TYPE |  |
| PHONE |  |
| EMAIL |  |
| SPECIAL INSTRUCTIONS |  |

|  |
| --- |
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