



CANADIAN INTERNATIONAL LOGISTICS INC.

Rate Request Form – LTL Service

Please fill out this rate request form and e-mail it to the CIL team at CIL@cmdintl.ca . Thank you for your request and we will respond as soon as possible.

Date:

Personal Information

Company:

Email Address:

Contact:

Telephone Number:

Freight Location Information

Origin Point Address:

Prov/State:

Postal/Zip:

Shipping Time:

Shipping Date:

Destination Point Address:

Prov/State:

Postal/Zip:

Receiving Hours:

Delivery Date:

Commodity Information

Package Description:

Commodity:

Is the freight skidded: YES / NO
Total Weight: LBS / KGS
Dimensions (LxWxH): INCHES / CM

No. of Skids
Class Number:
UN Number:

Dangerous Goods: YES / NO
Heated Service Protection: YES / NO
Shipping Appointment Required: YES / NO
Delivery Appointment Required: YES / NO

Tailgate Loading: YES / NO
Tailgate Delivery: YES / NO
Residential Non-Commercial: YES / NO

Special Instructions: