



Toptrans International Logistics Co., Ltd

PRE-MOVE SURVEY REQUEST FORM

Requested Survey Date & Time:		Actual Survey Date & Time:	
Address:		Survey REF:	Sales REF:
Name:		Quotation REF:	
Home Phone:	Cell Phone:	Email:	
Nationality:	Send Quote to: <input type="checkbox"/> office <input type="checkbox"/> home <input type="checkbox"/> booking agent		
Company Name:		Company Address:	
Contact:			
<input type="checkbox"/> sea <input type="checkbox"/> air <input type="checkbox"/> land <input type="checkbox"/> D/D <input type="checkbox"/> D/P <input type="checkbox"/> local <input type="checkbox"/> domestic <input type="checkbox"/> office <input type="checkbox"/> storage <input type="checkbox"/> diplomatic <input type="checkbox"/> others			
Invoice Paid By: <input type="checkbox"/> company <input type="checkbox"/> personal		Shipment Allowance: <input type="checkbox"/> Air: <input type="checkbox"/> Sea:	
Destination POE:		Final Delivery City:	
Prefer Destination Agent:		Avoid Destination Agent:	

<input type="checkbox"/> long carry <input type="checkbox"/> stairs: __/F <input type="checkbox"/> piano <input type="checkbox"/> heavy items ____ <input type="checkbox"/> hoisting <input type="checkbox"/> parking permit <input type="checkbox"/> special crating _____			
<input type="checkbox"/> oil paper <input type="checkbox"/> H/W <input type="checkbox"/> pets <input type="checkbox"/> storage at origin approx. ____CBM <input type="checkbox"/> storage at destination approx. ____CBM			
Estimate Packing Date:		Client Departure Date:	
Require Shipment Arrival Date:		Require Shipment Delivery Date:	
Insurance: <input type="checkbox"/> Air Sea Worldwide <input type="checkbox"/> company self insurance <input type="checkbox"/> booking agent <input type="checkbox"/> no			
Competitors: <input type="checkbox"/> SSF <input type="checkbox"/> TCI <input type="checkbox"/> CROWN <input type="checkbox"/> AGS <input type="checkbox"/> Links <input type="checkbox"/> others _____ <input type="checkbox"/> no			
How did you know about us? <input type="checkbox"/> used before <input type="checkbox"/> friend <input type="checkbox"/> company <input type="checkbox"/> internet <input type="checkbox"/> advertising <input type="checkbox"/> others			
Remark:			

Convenient Facilitative Quality Safety