

HOWELL MOULDINGS, L.C.
 201 OVERLAND PARK PLACE • NEW CENTURY, KS 66031
 Phone: (913) 782-0500 • Fax: (913) 829-0821
www.howellmouldings.com

The following is a list of available truck lines that Howell Mouldings uses. Please mark your preference below, fill in the required information and fax to 913-829-0821.

If you prefer, we will choose a truck line for you. Just mark the box authorizing Howell Mouldings to select a truck line. However, if you have an account set-up with the carrier we select, then your discount will apply.

- » Payment for "Collect Freight" may be necessary upon delivery.
- » Most carriers have a "Residential" charge in addition to their regular freight charges. Be sure to ask the carrier you select for the amount.
- » Howell Mouldings is not responsible for getting you the best rates, but we will pass on our discount when it is available. Freight quotes are estimated. Additional shipping charges may be billed to your account.
- » For orders that are to be held on the dock for pickup, you must provide the address for the terminal your order is to be shipped to. Please fill in the address field below. Thanks.

Truck Line	Phone Number	Notes
<input type="checkbox"/> A.B.F. Freight System, Inc.	800-367-2237	
<input type="checkbox"/> FedEx Freight East	800-872-7028	
<input type="checkbox"/> Old Dominion Freight Line	800-800-4006	
<input type="checkbox"/> UPS Freight (formerly Overnite)	800-333-7400	
<input type="checkbox"/> R & L Carriers, Inc.	800-543-5589	
<input type="checkbox"/> Roadway Express, Inc.	800-762-3929	
<input type="checkbox"/> FedEx National (formerly Watkins)	800-331-2513	
<input type="checkbox"/> Yellow Freight System	800-610-6500	
<input type="checkbox"/> Saia Freight (formerly Clark)	800-765-7242	
<input type="checkbox"/>		
<input type="checkbox"/> UPS (United Parcel Service)	Shipper Number is applicable > #	



Please Note: 16"x20" Glass cannot ship via UPS (in or out of frames)!

I authorize Howell Mouldings to select a truck line.

• Bill To: _____	• Ship To: _____
• Address: _____	• Address: _____
• City, State, Zip: _____	• City, State, Zip: _____
• Contact: _____	• Residential? <input type="checkbox"/> Yes <input type="checkbox"/> No
• Phone: _____ Fax: _____	PO#: _____
• Authorized By: _____	Date: _____

(Signature Required)

(Print Name Here)

