

BILL OF LADING - CUSTOMER'S DECLARATION OF VALUE

REGISTRATION NUMBER

THE CONSUMER MUST SELECT ONE OF THESE OPTIONS FOR THE CARRIER'S LIABILITY FOR LOSS OR DAMAGE
TO YOUR HOUSEHOLD GOODS
THIS IS A TARIFF LEVEL OF CARRIER LIABILITY - IT IS NOT INSURANCE

Option 1 - Standard Full Value Protection*

The Cost Estimate that you receive from your mover MUST INCLUDE Full (Replacement) Value Protection for the articles that are included in your shipment. If you wish to waive the Full (Replacement) Level of protection, you must complete the WAIVER of Full (Replacement) Value Protection shown below.

Full (Replacement) Value Protection is the most comprehensive plan available for protection of your goods. If any article is lost, destroyed, or damaged while in your mover's custody, your mover will, at its option, either: 1) repair the article to the extent necessary to restore it to the same condition as when it was received by your mover, or pay you for the cost of such repairs; or 2) replace the article with an article of like kind and quality, or pay you for the cost of such a replacement. Under Full (Replacement) Value Protection, if you do not declare a higher replacement value on this form prior to the time of shipment, the value of your goods will be deemed to be equal to \$6.00 multiplied by the weight (in pounds) of the shipment, subject to a minimum valuation for the shipment of \$6,000. Under this option, the cost of your move will be composed of a base rate plus an added cost reflecting the cost of providing this full value cargo liability protection for your shipment.

If you wish to declare a higher value for your shipmen a higher value may increase the valuation charge in	t than these default amounts, you must your cost estimate.	indicate that value here. Declaring
The Total Value of my shipment is: \$	_ (to be provided by the customer). De	ollar Estimate of the cost of your
move at Full (Replacement) Value Protection: \$	(to be provided by carrier	r).
<u>Deductibles</u> - You may also select one of the foll of <u>liability that</u> will apply for your shipment. (If you protection that is included in your cost estimate wi	do not make a selection, the "No Ded	Full (Replacement) Value level luctible" level of full value
\$250 Deductible () (Customer Initials	s) OR \$500 Deductible () (Customer Initials)
Dollar Estimate of the cost of your move with \$	Deductible: \$	(to be provided by carrier)
I acknowledge that for my shipment I have: 1) ACCEPTI charges and declared a higher Total Value of my sh Responsibilities When You Move" brochure explaining	ipment (if appropriate); and 2) received	tection included in the estimate of d a copy of the "Your Rights and
Customer's Signature:	Date:	
Declaration of Article(s) of Extraordinary (Ur the "Inventory of Items Valued in Excess of \$100 Per Po of this Inventory to the mover's representative. I also ach in excess of \$100 per pound will be limited to \$100 per poweight), not to exceed the declared value of the entire sloss or damage may be made on the attached inventory	und per Article" that are included in my sh knowledge that the mover's liability for lost ound for each pound of such lost or dama hipment, unless I have specifically identified	nipment and that I have given a copy s of or damage to any article valued ged article(s) (based on actual article
Customer's Signature:	Date:	
Option 2 – Waiver	of Full Replacement Value Protection	
This lower level of protection is provided at no addition that is considerably less than the average value of houself or damaged while in your mover's custody will be settled the settlement for an audio component valued at \$1,000	nold goods. Under this option, a claim for a cased on the weight of the individual article	ny article that may be lost, destroyed, e multiplied by 60 cents. For example,
Dollar Estimate of the cost of your move under the 60	O-cents option: \$ (<u>to be p</u>	provided by carrier)
COMPLETE THIS PART ONLY if you wish to WAIVE estimate provided (above) for your shipment and inst to do so you must initial and sign on the lines below	ead select the LOWER Released Value	
I wish to Release My Shipment to a Maximum Valu	ue of 60 Cents per Pound per Article:	: () (Customer Initials)
Lacknowledge that for my chipment I have: 1) WAIVED	the Full (Penlesement) I avail of protes	
estimate of charges; and 2) received a copy of the "Ye provisions.	our Rights and Responsibilities When Y	ction for which I have received an You Move" brochure explaining these

