

Date: 06-29-26

Client: AXON

Expedite Quote # 46855

AT BY 1900/2C

Pickup Date/Time Location:

Address: 642 CORDELL DRIVE

City: ATLANTA

State: GA Zip: 30349

White Glove Handler Contact & # for Pickup (as applicable): _____

White Glove Handler Contact & # for Delivery (as applicable): _____

Shipment Description: ELECTRONICS

Shipment Dimensions (LxWxH): 10@48X40X60 Over H/L/W Yes ___ No ___

Shipment Weight (lbs): 5000 Overweight Yes ___ No ___

Insured by Imperative: Yes ___ No If Yes - provide value: \$ _____

HazMat Material: Yes ___ No If yes, please provide details: _____

Please note if HAZMAT labeled but not subject to DOT Hazmat Standards

Special Services/Equipment Required (it is assumed that all vehicles are enclosed and have appropriate load bars and strapping unless otherwise requested):

- | | |
|---|--|
| <input checked="" type="checkbox"/> Exclusive Use Vehicle (EUV) | _____ Team Drivers Required |
| _____ Direct Asset Carrier Required | _____ Uniform Driver Required |
| _____ Air-Ride Suspension | _____ US Citizen Driver Required |
| _____ Temperature Control | _____ English Speaking Driver Required |
| _____ Dock Height Truck Required | _____ Non-Rental Vehicles Required |
| _____ Flat Bed | _____ GPS/ELD Required |
| _____ Pallet Jack Required | _____ Loading/Unloading Required |
| _____ Liftgate Required | _____ Inside Pickup/Delivery Required |

Other Services/Equipment Required (please detail): _____

Client Contract Specifics (describe or refer to SOP): _____