



Logistics Plus® LTL Client-Specific Pricing Checklist

(It is important that we acquire as much of this information as possible to ensure best pricing)

Client Name: _____

About Client: _____

Letter of Authorization: **Logistics Plus can provide a template upon request.**

Shipping and/or Receiving Location(s): _____

Can You Provide a Detailed Example Shipment File (3 months or greater?): **YES / NO**

Commodities Shipped: _____

NFMC Item(s) if known: _____

Freight Class(es) if known: _____ (can sometimes be derived from data file is provided)

Avg. Shpt. Weight: _____ (can often be derived from data file is provided)

LTL Shipments per Month: _____ (can often be derived from data file is provided)

Typical Packaging: _____

Example Freight Photos Included: **YES / NO** (some carriers require)

Pickup Requirements (e.g., Live, Drop Trailer, etc.): _____

Delivery Requirements (e.g., B2B, Residential, etc.): _____

Accessorial Service Requirements (e.g., notify, liftgates, hazmat, etc.): _____

Special Pricing Request (e.g., FAKs, assessorial waivers, etc.): _____

Carriers to specifically include or exclude: _____