

## HOUSE OF CRAVEN SHIPPING RELEASE FORM

This Shipping Release From (this "Agreement") is made effective as of \_\_\_\_\_\_(Date) between House of Craven and the following Bidder or Buyer:

I, \_\_\_\_\_\_, hereby authorize the release of the following item(s) to \_\_\_\_\_\_. I understand that by signing this release, I am relinquishing all responsibility and ownership of the mentioned item(s) to \_\_\_\_\_\_. I acknowledge that the item(s) are in satisfactory condition at the time of release. I further agree that \_\_\_\_\_\_\_ assumes all liability for the item(s) once they are in their possession. This release is valid as of \_\_\_\_\_\_\_ (Date) and will remain in effect unless otherwise specified in writing. Please sign below to acknowledge receipt of the item(s) and acceptance of the terms outlined in this release.

## I. CONTACT INFORMATION.

Name:		Invoice Number:	
Phone:		Auction Date:	
Email:			
Street Address:			
City:	State:	Zip:	
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Name of Third-Party Shipping Partner Responsible for Pickup:

The Bidder or Buyer is responsible for contacting House of Craven with any changes to address, phone, email, or other contact or billing information.

## SHIPPING RELEASE FORM

ITEM /	ITEM NAME / DESCRIPTION	<b>INSURANCE VALUE</b>		
LOT NUMBER	DIMENSIONS			

Buyer's Name: By:	Date:	
FOR HOUSE OF CRAVEN RECORD	DS:	
By:	Date:	
Inventory Control Number:	RFID / Location Data:	

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