

## Outlaw Investments, INC. Transportation Contract

Pickup Address:		Home or Business:	
City:	State:	Zip	-
Contact Name:	Phone:		
Delivery Address:	Home or Business:		
City:	State:	Zip:	-
Contact Name:	Phone:		
Owner's Information			
Name:	Address:		
City:	State:	Zip:	
Phone:	F Mail:		

## **Boat Information**

Name of Boat:	VIN #		
Make:	Model:	Year:	
Length: Beam:		Cover on boat: (y/n)	
<b>Trailer Brand</b> : (if boat is on trailer):		Year Made:	
VIN #	Length:	Hitch Type:	
Trailer Type (steel, aluminum)		Lic Plate (State & #)	
Age of Tires	Notes:		
TRANSPORT QUOTE:			
NON-REFUNDABLE DEPOSIT (25 % o	of transport rat	e) Paid: (date)	
-Balance of the transport invoice m	ust be paid wit	hin 24 hours of the boat being loaded.	
-Payments made by credit card will	incur a 3% pro	cessing fee	
*I have read the 5-page Boat Prep For	Transport guide	e, along with the information contained in this	
contract, and agree to it.			
Signature 1:		DATE:	
Signature 2:		DATE:	
Please fill out, sign, and send contra	act to: <u>outlawb</u>	oattransport@aol.com	

Also take a photo of the signed contract and text to 909-285-7486 Thank you for your business!