



**CREATIVE Transportation Services, Inc.**

21001 San Ramon Valley Blvd, A4-313, San Ramon, CA 94583

**Fax to: 925.362.8030**

**Pick-Up Request**

Attn: \_\_\_\_\_

Date: \_\_\_\_\_

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

**Please fill out the information below and fax to: 925.362.8030**

**Pick Up 1**

Shipper: \_\_\_\_\_

Consignee: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

P/U Date: \_\_\_\_\_ P/U Hours: \_\_\_\_\_

P/U Date: \_\_\_\_\_ P/U Hours: \_\_\_\_\_

**Pallets/Pcs: \_\_\_\_\_ Weight: \_\_\_\_\_ Commodity: \_\_\_\_\_ Class/Item# \_\_\_\_\_**

**Equipment Required:** \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

\_\_\_\_\_

**Pick Up 2 (optional)**

Shipper: \_\_\_\_\_

Consignee: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

P/U Date: \_\_\_\_\_ P/U Hours: \_\_\_\_\_

P/U Date: \_\_\_\_\_ P/U Hours: \_\_\_\_\_

**Pallets/Pcs: \_\_\_\_\_ Weight: \_\_\_\_\_ Commodity: \_\_\_\_\_ Class/Item# \_\_\_\_\_**

**Equipment Required:** \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

\_\_\_\_\_

**Thank you for your business. We will process your request and contact you shortly.**

**Phone: 800.565.0307**

**Fax: 925.362.8030**

**www.creative-trans.com**