SMITH & CO-2 LLC

Shipper-Broker Transportation Services Agreement

Template for review and completion | (775) 501-7132 | admin@smithcologistics.com

Shipper legal name	_____
Billing address	_____
Primary contact / email	_____
Effective date	_____

1. Services

Broker may arrange transportation services for shipper's freight through authorized motor carriers. The specific shipment details, services, rates, accessorials, and timing should be confirmed in writing for each shipment.

2. Rates and charges

Rates, fuel charges, accessorial charges, payment terms, and invoice requirements must be agreed in writing. No unlisted charge is guaranteed unless authorized in writing by the parties.

3. Shipment information

Shipper will provide accurate shipment details, including commodity, weight, dimensions, packaging, value when requested, pickup and delivery addresses, hours, appointments, and special handling or regulatory requirements.

4. Cargo and claims

The parties will handle loss, damage, delay, and cargo claims under applicable law and the written agreements governing the shipment. This template does not replace applicable statutory requirements.

5. Payment and documentation

Shipper will pay undisputed charges under the written payment terms and provide required supporting documentation. Any credit terms must be approved separately in writing.

6. Compliance

Each party will comply with applicable laws and regulations. Broker's role and the carrier's responsibilities should be described consistently with applicable law and the shipment-specific documents.

7. Term and termination

Either party may terminate the ongoing arrangement by written notice, subject to completing accepted shipments and resolving outstanding charges and claims.

8. Governing law and dispute resolution

The parties should specify governing law, venue, notice addresses, and any dispute-resolution process after review by qualified transportation counsel.

9. Signatures

BROKER: Smith & Co-2 LLC
By: _____ Title: _____
Signature: _____ Date: _____

SHIPPER Legal Name: _____
By: _____ Title: _____
Signature: _____ Date: _____

Governing law / state (to be reviewed): _____

Return completed documents to admin@smithcologistics.com.

Privacy reminder: do not send tax identification numbers through unsecured email. Use a secure delivery method when available.