



SHIP TO CYCLE

partner of



Transport quote request form

Client info			
Name and Last Name		Company Name (if applicable)	
Address		City	
Province (if applicable)		Postcode	
Country		E-mail	
VAT (if applicable)		Telephone (incl. international code.)	+XX

Bike Info							
Type	<input type="checkbox"/> Bike		<input type="checkbox"/> E-bike				
Packaging	<input type="checkbox"/> Bike box		<input type="checkbox"/> Cardboard box				
Lenght (cm)		Width (cm)		Depht (cm)		Weight (kg)	

Pick up info			
Bike availability date	Fare clic o toccare qui per immettere una data.	Sender	
Address		Additional notes	
City		Province	
Postcode		Country	
Contact name		Telephone	

Delivery info			
Receiver			
Address		Additional notes	
City		Province	
Postcode		Country	
Contact name		Telephone	

Additional services			
Full protection insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, bike value
Bike brand			Bike model

Service info			
Type of transport	<input type="checkbox"/> One way		<input type="checkbox"/> Round trip
Bike availability date for pick up	Fare clic o toccare qui per immettere una data.		
Same information as for the outward transport also for the return?	<input type="checkbox"/> Yes		<input type="checkbox"/> No

If No, indicate new info for the return

Pick up info			
Sender			
Address		Additional notes	
City		Province	
Postcode		Country	
Contact name		Telephone	

Delivery info			
Receiver			
Address		Additional notes	
City		Province	
Postcode		Country	
Contact name		Telephone	