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## SHIPPER'S INVENTORY DESIGNATION FORM

**PLEASE SELECT ONE OF THE OPTIONS BELOW  
AND RETURN SIGNED FORM TO CASTINE**

1. I will be present to review/sign inventories at Origin and check off/sign the Customer Check Off Form at Destination.

Printed Name: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_ DATE: \_\_\_\_\_

2. I will not be present to review/sign inventories at Origin and check off/sign the Customer Check Off Form at Destination, but have designated the following to be my representative.

Printed Name: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_ DATE: \_\_\_\_\_

REPRESENTATIVE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_ DATE: \_\_\_\_\_

**I AM WAIVING MY RESPONSIBILITY TO CHECK OFF MY INVENTORIES AT DESTINATION**  
*(I understand that by doing so I will be waiving my right to file a claim for any missing items)*

*Printed Name:* \_\_\_\_\_

*SIGNATURE:* \_\_\_\_\_ *DATE:* \_\_\_\_\_