



National Equine Transportation

1050 E. 2nd St. #135 Edmond, OK 73034

817-219-0490 888-294-8877 Fax

www.nationalequinetransport.com

TRANSPORTATION CONTRACT

OWNER/AGENT INFORMATION:

NAME: _____ PHONE: _____ CELL: _____

ADDRESS: _____ STATE/ZIP: _____

PICK-UP INFORMATION:

DATE: _____

LOCATION: _____

NAME: _____ PHONE: _____ CELL: _____

ALTERNATENUMBERS: _____

ADDRESS: _____ STATE/ZIP: _____

DELIVERY INFORMATION:

DATE: _____

DESTINATION: _____

NAME: _____ PHONE: _____ CELL: _____

ALTERNATENUMBERS: _____

ADDRESS: _____ STATE/ZIP: _____

HORSE INFORMATION:

NAME	BREED	COLOR	SEX: MARE, GELDING OR STUD	HORSE'S CONDITION
1.				
2.				
3.				
4.				
5.				

1. TRANSPORTATION FEE: _____

2. ADDITIONAL EXPENSES: _____

3. TOTAL TRANSPORTATION COST: _____

(Total of Lines 1 and 2)

DEPOSIT: _____ (TERMS: Credit Card, Cashier's Check or Money Order **ONLY (NO OTHER CHECKS ACCEPTED)**) via U.S. Priority Mail or overnight via Federal Express, UPS, or DHL) **NOTE: ALL DEPOSITS ARE NON-REFUNDABLE.**

BALANCE DUE UPON DELIVERY/PICK-UP: _____ (TERMS: Cash, Cashier's Check or Money Order **ONLY—NO OTHER CHECKS ACCEPTED**).

AUTHORITY: I hereby authorize the transportation of the above described horse(s) for the total Transportation Cost indicated above and set forth on Line Number 3. I understand that professional care will be taken to provide for the safety and comfort of the above referenced horse(s) and hereby authorize veterinarian care be provided at my (Owner/Agent) expense and at the discretion of National Equine Transportation and/or the Agents and/or Transporters thereof, should they feel necessary.

SIGNATURE OF OWNER/AGENT: _____

DATE: _____

NATIONAL EQUINE TRANSPORTATION AND/OR THE AGENTS, OR TRANSPORTER(S) THEREOF WILL NOT BE HELD RESPONSIBLE for any of the following conditions: illness, injury, time delay or other damages incurred, if any, during transportation or layover of the subject equine(s)/livestock. Any and all required health papers, veterinary care, equine/livestock insurance or any added expense necessary for the comfort and safety of the subject equine/livestock will be the responsibility of the Owner/Agent listed hereinabove. It is agreed and acknowledged that exclusive venue of all actions, if any, between Owner/Agents and National Equine Transportation and/or the Agents, or Transporters thereof shall be in Oklahoma County, Oklahoma. Owner/Agent further acknowledges and understands that this Transportation Contract is the entire agreement between the Owner/Agent and National Equine Transportation and/or the Agents, or Transporters thereof and the agreement cannot be modified or changed in any way by the representations or statements, if any, of any Agent or Transporter of National Equine Transportation or the Owner/Agent of the equine/livestock identified hereinabove. I hereby acknowledge that I have read, understand and further agree to be bound by the terms and provisions set forth in this Transportation Contract.

OWNER/AGENT.SIGNATURE: _____

DATE: _____

Additional Information and Requirements:

1. It is required that each horse has a Coggins Test that is less than one year old, as well as a Health Certificate that is less than thirty (30) days old. These documents must be the originals, not copies, if traveling to or through Arizona, California, or Florida. Copies will be accepted for all other routes. The current Coggins Test and Health Certificate must be provided at the time of pick-up of the horse(s) and will accompany the horse(s) to the final destination.
2. It is required that the horse(s) be wearing a leather or nylon halter that is in good condition and appropriately fitted to the horse and that the horse(s) be confined to a small stall/area at the time of pick-up.
3. One reasonably sized box of tack will be shipped at no charge. There will be a charge for additional or oversized items.
4. National Equine Transportation must be advised at the time of initial contact if there will be a problem in safely getting the transport rig in or out of the pick up or delivery location. It is required that ample space be available to maneuver a transport truck and trailer for loading and in turning around.
5. It is National Equine Transportation's standard policy to fax the Transportation Contract to Owner/Agent and receive a completed copy of the Contract via fax before horse(s) are picked up. A transport stall will be reserved upon receipt of a signed Transportation Contract. It is required that a deposit equal to 50% of the Total Transportation Cost be received by National Equine Transportation no later than 4 days following receipt of said contract. The balance (cash, cashier's check or money order—**NO OTHER CHECKS ACCEPTED**) will be due at the origination or destination point.
6. It is required that National Equine Transportation be advised at the time of scheduling transportation of horse(s) of any unusual characteristics that might affect the horse and/or the transport drivers during the trip (examples: loading/unloading problems, blindness, tendency to kick or strike-out, history of Colic, extreme age, claustrophobia, soundness problems, etc.).
7. It is required that Owner/Agent provide one bale of hay per horse so that the horse's diet is not changed during transit, otherwise coastal hay provided by National Equine Transportation will be fed. If the horse(s) have special feeding requirements, National Equine Transportation must be advised of the same at the time of scheduling the transport and again upon pick-up.
8. It is required that the horse(s) not be fed grain one feeding before pick-up and not be fed grain the first feeding after delivery.
9. Bandage type leg-wrappings are not recommended during transit. It is required that shipping boots be used only if the horse(s) are accustomed to wearing them.
10. Because it is not a horse's natural environment to be confined and transported long distances, it can be an uncomfortable and stressful event (especially the first transport). Therefore, prior to pick-up, the horse should be exposed to a confined space or stall a few times wearing any tack intended for their trip. Time spent preparing the horse(s) will be advantageous to the horse's transport experience.
11. The transport driver will call the day before pick-up with a two hour time frame for arrival on all pick-ups and deliveries. During that two hour time frame the transport driver will call for more specific directions. It is very important that alternate phone numbers be provided for ultimate accuracy as to pick-up and delivery locations. The transport driver will not be able to pick-up or deliver by the address provided only.

Owner/Agent Initials _____ Date _____



NATIONAL EQUINE TRANSPORTATION

1050 E. 2nd ST. #135 Edmond, OK 73034

817-219-0490 888-294-8877 FAX

www.nationalequinetransport.com

CREDIT CARD AUTHORIZATION FORM

I hereby authorize National Equine Transportation to charge my Credit Card for Horse Transportation as of:

Date: ____/____/20____, in the amount of \$_____, plus credit card fees of 3-4% for horse transportation from (origination):_____ to(destination):_____

Name as it Appears on Credit Card:

_____.

Card Holder's Billing Address:

_____.

Credit Card Type: (Please circle one)



Credit Card Number:

_____.

Verification Code (last three digits on signature side of card): _____

Expiration Date of Credit Card: ____/____/20____.

Card Holder's Signature: _____ **Date:** _____

By signing this form, I authorize these charges and understand this amount is non-refundable. _____ (Card Holder's Initials for Acknowledgment of terms.)

National Equine Transportation Use ONLY ---from this line forward.

Authorization Code:_____ Date:_____.