



DISPATCHER SERVICE AGREEMENT

Dispatcher: Lethal Transport

Phone: (540)597-8885

Email: Lethaltransporting@gmail.com

Website: lethaltransport.com

I, _____ (**the carrier/owner operator**), of

Truck # _____, **Trailer #** _____,

Motor Carrier (MC) Number _____, and **Department of Transportation (DOT) Number,** _____

hereby grants authorization or permission to: **Lethal Transport** to act as my **Dispatcher** for the sole purpose of **searching for and booking loads, processing all brokerage paperwork (carrier packet & rate cans)** and obtaining and/or submitting all **necessary documents required (MC Authority, Certificate of Insurance, W9 -Credit App & Notice of Assignment)** in order to expedite loads and dispatch via telephone, fax or e-mail for my truck(s), in the state of _____.

ALL BILLING, INVOICING, AND COLLECTIONS OF REVENUE FROM SHIPPERS, BROKERS AND/OR FACTORING COMPANIES ARE THE SOLE RESPONSIBILITY OF THE CARRIER/TRUCKING COMPANY, UNLESS Lethal Transport AND CARRIER/TRUCKING COMPANY HAVE ARRANGED AND AGREED UPON ADDITIONAL SERVICES PROVIDED TO THE CARRIER/TRUCKING COMPANY BY Lethal Transport

If revenue for a shipment or shipments is **uncollectible**, **Lethal transport** will be held harmless and no penalty or deduction of fees will be made.

Lethal Transport will be held harmless in the event of any and all claims, and Carrier/Trucking Company will still be obligated to pay for services rendered by Lethal Transport.



The Service Fee for Lethal transport will be:

7 % per load booked

Note: This fee for Dispatch Services includes Dispatcher contracting Dedicated Freight (lanes) for the Carrier

As Loads/Freight/Cargo are picked up, delivered, and Carrier/Trucking Company is paid FIRST, an amount equal to the above stated % or flat rate will be payable to:

Lethal Transport.

Either party has the right to end this agreement without cause at any time with seven (7) days notice by written or emailed request. This is not an exclusive agreement/contract.

By signing this Dispatcher Agreement below, I fully understand the terms of this agreement.

Carrier Print: _____ **Carrier Signature:**

Phone Number: (____) ____-____ **Carrier Email:**

Dispatcher/Dispatch Company: _____ **Lethal Transport**

Signature _____ **Tony Chinchilla**

NOTE: When returning the [Dispatcher Packet](#), which includes the completed [Dispatcher Agreement](#), the [Carrier Profile](#) and the [Limited Power of Attorney](#), please include [COPIES](#) of your [MC Authority Letter \(Certificate\)](#), [Certificate of Insurance \(C.O.I.\)](#), and [W9](#). Also, If you are working with a [factoring company](#), please include a copy of [factoring company's credit application](#) so that they can run the credit check on the brokers and send a [Notice of Assignment \(N.O.A.\)](#) if the credit is favorable. Thank you.

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