

Authority to Leave Freight Form

Name (print):	
Position:	
Tel:	
Fax:	
Email:	
Company Name:	
Address:	
Delivery Point:	

Eg. Back door, garage etc

I, _____ authorise
 _____ (driver name) of run number _____

to sign on my and my company's behalf and leave any item(s) requiring signature that are delivered by Peter Baker Transport Limited or PBT Couriers Limited.

NOTE: This excludes **Dell** and **FEDEX** deliveries as these Customers require a Signature on every one of their deliveries.

I agree that Peter Baker Transport Limited or PBT Couriers Limited will not be liable for any loss or damage that results from leaving freight or parcels in my absence.

Signature: _____ Date: _____