



Carry Da Load United, LLC

Phone: (770) 802-0336

Email: support@carrydaloading.com

Website: www.carrydaloading.com

WELCOME to **Carry Da Load United, LLC** Team! With us as YOUR logistics company, this will become a partnership where we are here to help and serve you. We will not do anything without your express permission or say so.

We understand how important your business is and that you are trusting us to better you financially. We are up for the task!

If after reading through the Carrier Agreement you feel that we are not the logistics company for you, there are no hard feelings. Just reach out to us letting us know. Otherwise, fill out the **Carry Da Load United, LLC** Carrier Packet and send back the required documents listed below. We are here for you and if at anytime you are confused, unsure, and/or have any questions you can contact us via phone at (770) 802-0336 and/or email at support@carrydaloading.com.

Again, we are pleased that you have decided to grant us the permission to act as your dispatching service provider representing your company. You have made a wise decision; we will represent you with integrity, professionalism and pride in all that we do!

CARRIER SET-UP REQUIREMENTS

REQUIRED DOCUMENTS:

- Copy of Client's Carrier Authority (MC Permit) and/or DOT #
- Copy of Owner Operator's and Driver's Driver License
- Copy of Signed W-9 Form
- Copy of Insurance Certificate
 - We require \$100,000 in Cargo and \$1,000,000 in Liability
- Copy of CARB Compliance Certificates (if applicable)
- Internet Load Board and Account Access (if applicable)

YOU ELECTRONICALLY SIGN:

- Client Agreement
 - Agreement For Dispatch Service
 - Limited Power of Attorney
- Company Profile
 - Dispatch Client Profile
- Credit Card Payment Authorization
- Automatic Payment Authorization For Factoring

THANK YOU FOR CHOOSING CARRY DA LOAD UNITED, LLC



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This agreement made as of this ____ day of _____, 2022, by and between #)
O y # hereinafter referred to as ("CDLU" "CDL United and/or Dispatch")
and _____(Contact Name) of
_____ (Company Name), hereinafter referred to as Client.

‡ , Client is a Carrier/Owner Operator, desiring to retain **Carry Da Load United, LLC** to provide dispatch services.

‡ , **Carry Da Load United, LLC** is a transportation dispatcher handling the necessary paperwork between shippers and the Client.

u # Carry Da Load United, LLC

1. A Copy of Client's Certificate of Authority
h @ #
3. A signed W-9.
4. This Agreement form completed, dated, and signed.

2. u-U -Vu\ 7‡ \ kM

Carry Da Load will:

1. Book loads on the Client's behalf.
2. Send rate confirmations to Clients by 6pm.
3. Find freight that best matches the profile for the Client.
4. Upon the Client agreeing to the load, **Carry Da Load United, LLC** will fax to shipper /broker

the Client's Authority, W-9, proof of insurance, and order insurance certificates if required, along with any other required supporting documentation.

5. Handle the setting of appointments if necessary.
6. Prepare directions to shipper/consignee, if necessary.
7. Provide access to our rates and shippers depending on location of the truck.
8. Assist with any problems that arise in the transit of the load when necessary, within our capabilities. Client is responsible for own equipment, we can direct you to a service that may be helpful.

9. All load information is available to the Client at all times, #) O y # will hold on to the dispatch, accessorial information, etc. until the load is completed.

10. Upon forwarding the final load confirmation, and mailing all documentation to the Client, the services of #) O y # have been fully performed.

11. Book and communicate load information to drivers between 8am and 8pm Monday –Saturday. Client will reach out to the broker for any issues regarding the load after 8pm.



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1. Dispatcher agrees to handle paperwork, phone, and fax to and from the Broker or Shipper to tender commodities or shipments to Client for transportation in interstate commerce by Client between points and places within the scope of Client's operating authority.

2. Dispatcher bears no financial or legal responsibility in the transaction between the Shipper, Client agreement.

3. Dispatcher will:

1. Make a 100% effort to keep Clients truck(s) loaded.

2. Client will be contacted about every load offer we find, and the driver will Accept or Reject the load. Client cannot cancel once the load is booked.

3. Invoice the Client at time of service, also provide a copy of each load Confirmation Sheet, Client is being billed for.

B. \ #

1. Client gives #) O y O# authority to provide his/her signature for rate confirmation sheets, invoices and associated paperwork necessary for securing cargo and billing purposes.

2. Client agrees to collect payment from the Shipper promptly, following receipt of a freight bill and proof of delivery of each shipment to its assigned destination, free of damage or shortage. The amount to be paid by Shipper to Client shall be established between the parties on a per shipment basis prior to commencement of each individual shipment. A load confirmation including details of shipment and revenue to be paid will be supplied via FAX or EMAIL by Shipper to Client. Confirmation will be signed by #) O y and returned via FAX or EMAIL to Shipper.

3. Client agrees to text **Carry Da Load United, LLC** when they arrive at the shipper.

4. Client agrees to text **Carry Da Load United, LLC** once loaded.

5. Client agrees to text **Carry Da Load United, LLC** once they arrive to the receiver.

6. Client agrees to text **Carry Da Load United, LLC** once loaded from receiver.

7. In the event of a breakdown, Client is responsible for contacting roadside. We recommend signing up with a roadside company and issuing that contact info to your driver. Client is responsible for payment of any needed repairs.

8. Client nor driver is allowed to cancel once a load is booked.

9. Client is responsible for obtaining all permits.

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The Client agrees to pay **Carry Da Load United, LLC** a non-refundable Three Hundred and Fifty Dollar (**\$350.00**) setup/admin fee. This fee is required to be paid before the initial dispatch. These rates will be required to be paid to #) O y as per the conditions of the agreement for (i.e. a 30 day subscription). A 3 day grace period will be allowed before the account becomes



overdue. At 0 days the account will be suspended and a reactivation fee of _____ will apply in addition to any overdue fees. After _____ the account may be placed for collection.

#) Oy _____ will invoice the Client as per the terms of the agreement via Email, U.S. Mail or faxing said invoice. Payment can be made to **Carry Da Load United, LLC** by Credit/Debit cards, Apple Pay, Wires, ACH Deposits, Certified Check, or Money Order. Cash App nor Venmo is accepted. Once the payment is processed the Client will be sent a confirmation receipt via email, fax or US Mail.

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Once a load has been set up for the Client and all information given, it will be the responsibility of the Client to handle directly with the shipping party any problems, issues, delays, overages, shortages, damages, or billing and collections issues, unless, you have made arrangements for additional services from #) Oy

In no event will **Carry Da Load United, LLC** be liable for any incidental, consequential, or indirect damages for the loss of profits, or business interruption arising out of the use of the service.

We do not guarantee a minimum gross amount for trucks under our dispatch service but our weekly gross quota is _____. Each truck, however, is able to gross up more depending on how hard the driver is willing to work.

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Our contract term is _____ months minimum.
Contracts terminated by client before _____ month minimum will forfeit their deposit.

B. O _____ h _____

Commercial vehicles must be loaded in such a manner as to prevent its cargo from leaking, spilling, blowing or falling from the vehicle. The cargo must be immobilized or secured to prevent shifting to the extent that the vehicle's stability or maneuverability is affected. All vehicle structures, systems, parts and components used to secure cargo must be in proper working order with no damaged or weakened components that will adversely affect their performance. Cargo must be firmly immobilized or secured on or within a vehicle by structures of adequate strength, dunnage or dunnage bags, shoring bars, tie-downs or a combination of these. Articles of cargo that are likely to roll must be restrained by chocks, wedges, a cradle or equivalent means to prevent rolling. Federal regulations provide for specific means of securing logs, building products, metal coils, paper rolls, concrete pipes, intermodal containers, automobiles, heavy equipment, crushed vehicles, and boulders. Cargo must be secured so that when a vehicle decelerates at a rate of 20 feet per second, the cargo will remain on the vehicle and will not penetrate the vehicle's front-end structure. Any vehicle having a load or component which extends beyond the sides more than 4 inches or more than 4 feet beyond the rear must have the extremities marked with a red or orange fluorescent warning flag. If the projecting load is 2 feet in width or less, only one flag is required at the extreme rear of the load. If the projecting load is greater than 2 feet in width, two flags must be used at the extreme width and length on each side of the load.



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A driver cannot operate a commercial vehicle unless (1) the cargo is properly distributed and adequately secured, (2) the means of fastening the cargo is secured, and (3) the cargo does not obscure the driver's view or interfere with the movement of his arms or legs. A driver must assure himself that the load is adequately secured before he drives the vehicle and must examine the cargo and its load-securing devices within the first 50 miles after beginning a trip and adjust the load-securing devices as needed. The driver must also reexamine the cargo and its securing devices when he makes a change of his duty status, after the vehicle has been driven for three hours, or after the vehicle has been driven 150 miles whichever comes first. The load inspection procedures do not apply to a sealed trailer when the driver has been ordered not to open it or to a trailer that has been loaded in a manner that makes inspection of the cargo impracticable.

If a member of the public is injured because of improperly loaded cargo, both the shipper who loaded the cargo and the Client may be held liable for the injury. A shipper that assumes responsibility for loading the vehicle can be held liable for improperly securing a load under a common law theory of negligence, and federal regulations will provide evidence of the proper standard of care to be utilized by the shipper in loading the vehicle. When the driver himself is injured in an accident, the shipper cannot be held liable for the improper loading of the vehicle unless the loading defects are latent and concealed and cannot be discerned by ordinary observation by the agents of the Client. In determining if the defect in loading is patent and should have been discovered by the driver, a court will take into consideration the experience of the driver and whether the driver is given assurances by the shipper's employees that there is no defect in the loading of the cargo. A motor Client cannot be held liable for improperly loading a sealed trailer since the driver does not have the opportunity to inspect the load. When a person is injured during the loading or unloading process at the shipper or consignee's facility, the trucking company's liability will be determined according to the rules applicable to the facility owner, and the company will be subject to the same liability or freedom from liability as the owner.

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) O y O# is NOT responsible for:

1. Billing Issues
2. Load problems
3. Advances (All advances will have to be handled directly between Client and Shipper / Broker)
4. Handling and storage of paperwork (All documents will be sent to Client unless other arrangements are made)
5. DOT compliance issues.
6. SPIKE INSURANCE

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This agreement shall be governed by and construed in accordance with laws of the State of Georgia without giving effect to any choice of law or conflict of laws provision or rule (whether of the State of Georgia or any other jurisdiction) that would cause the application of the laws of any jurisdiction other than those of the State of Georgia.

Kyk@) @u@Vo° V) †-Vy-o
) O y O# and the CLIENT hereby consent to and agree to submit to the jurisdiction of the Federal and state courts located in Gwinnett County, GA. in connection with any claims or controversies arising out of the Agreement. IN WITNESS WHEREOF, the parties hereto have executed this Agreement as the date written.

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AGREEMENT FOR DISPATCH SERVICES

Non-Competition Agreement

This Non-Competition Agreement (“Agreement”) is made and entered into this ____ day of _____, 2022 (the “Effective Date”) by and between _____ (“Carrier”) and **CARRY DA LOAD UNITED, LLC** (“CDL”), principal place of business at Buford, GA.

For good consideration and as an inducement for Company to enter into this Agreement with Carrier, Carrier hereby agrees not to directly or indirectly compete with Company and its successors and assigns during the period of employment and for a period of ____ years following termination of employment and notwithstanding the cause or reason for termination.

The previously mentioned term “not compete” as used herein shall mean that Member shall not own, manage, or operate a business substantially similar to or competitive with the present business of Company or such other business activity in which Company may substantially engage during the term of employment. Carrier acknowledges that Company shall or may in reliance of this Agreement provide access to trade secrets, clients, and other confidential data and good will. Carrier agrees to retain said information as confidential and not to use said information on his or her own behalf or disclose same to any third party. This Agreement shall extend for a radius of ____ miles from any location from which any services conducted by Company are operated out of and shall be in full force and effect for ____ years after termination. This Agreement shall be binding upon and inure to the benefit of the parties, their successors, assigns, and personal representatives.

The parties hereby acknowledge that they are bound by obligations set forth in this document by affixing their signature below.

Signature : _____

Carrier Name: _____

Date: _____

Signature: _____

Company Representative: _____

Date: _____



LIMITED POWER OF ATTORNEY

This Limited Power of Attorney (the AGREEMENT) is made effective on this _____ day of _____, 20____ between: **Carry Da Load United, LLC** hereinafter called DISPATCH a company established under the laws of the State of **Georgia**, _____ (company name) hereinafter called CARRIER, motor carrier company with MC # _____ and/or DOT # _____ CARRIER hereby appoints DISPATCH as my Attorney-in-Fact (AGENT). DISPATCH agents shall have full power and authority to act on my behalf. This power and authority shall authorize DISPATCH to manage and conduct affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. DISPATCH powers shall include, but not be limited to, the power to:

- Professional dispatch services, including contact drivers, shippers and brokers on my behalf for cargo, Transfer of Paperwork (Carrier Packet, Rate Confirmations, Insurance Certificates, Invoices and all necessary Paperwork) to shippers. Sign and execute rate confirmations for freight and collect all payment dues on my behalf.

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner. DISPATCH shall not be liable for any loss that results from a judgment error that was made in good faith. However, DISPATCH shall be liable for willful misconduct or the failure to act in good faith, while acting under the authority of this power of Attorney. I authorize DISPATCH to indemnify and hold harmless any third (3rd) party who accepts and acts under this document. This Power of Attorney shall become effective immediately and shall remain in full force and effect until revoked by me in writing. Such revocation is to be sent via e-mail ten (10) days in advance to DISPATCH to **support@carrydaloading.com**.

IN WITNESS WHEREOF, the parties hereto have executed this AGREEMENT as the date written.

CARRIER:

DISPATCH:

COMPANY NAME: _____

COMPANY NAME: **Carry Da Load United, LLC**

CONTACT NAME: _____

DISPATCHER NAME: _____

CONTACT SIGNATURE: _____

DISPATCHER SIGNATURE: _____

DATE: _____

DATE: _____



DISPATCH CARRIER PROFILE

Instructions: To be certain we have an accurate profile of your organization/company and full knowledge of your transportation services and needs, please complete the Carrier Profile below and return all required documents. The better informed we are the better we will be able to assist you. This form should be updated at any time by notifying us. This information is for our use only and will not be released to any third party without your express written permission.

PART 1: CARRIER INFORMATION SECTION

LEGAL COMPANY: _____ D/B/A (If Any): _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MAIN CONTACT: _____ E-MAIL: _____

OFFICE PHONE: _____ FAX: _____ CELL PHONE: _____

EMERGENCY CONTACT: _____ EMERGENCY PHONE: _____

MC NUMBER: _____ DOT NUMBER: _____ EIN/SS: _____

SCAC CODE: _____ TWIC CERTIFIED: _____ HAZMAT CERTIFIED: _____

PART 2: SERVICE AREA OF OPERATION

Disclaimer: Check the states you want to make your runs to, otherwise we will assume that you want to run all 48 states and your route will be planned accordingly!

USA: All 48 states

- | | | | | | |
|---------------------------------------|-------------------------------------|---|--|--|---|
| Alabama: <input type="checkbox"/> | Georgia: <input type="checkbox"/> | Maine: <input type="checkbox"/> | Nebraska: <input type="checkbox"/> | Ohio: <input type="checkbox"/> | Texas: <input type="checkbox"/> |
| Arizona: <input type="checkbox"/> | Idaho: <input type="checkbox"/> | Maryland: <input type="checkbox"/> | Nevada: <input type="checkbox"/> | Oklahoma: <input type="checkbox"/> | Utah: <input type="checkbox"/> |
| Arkansas: <input type="checkbox"/> | Illinois: <input type="checkbox"/> | Massachusetts: <input type="checkbox"/> | New Hampshire: <input type="checkbox"/> | Oregon: <input type="checkbox"/> | Vermont: <input type="checkbox"/> |
| California: <input type="checkbox"/> | Indiana: <input type="checkbox"/> | Michigan: <input type="checkbox"/> | New Jersey: <input type="checkbox"/> | Pennsylvania: <input type="checkbox"/> | Virginia: <input type="checkbox"/> |
| Colorado: <input type="checkbox"/> | Iowa: <input type="checkbox"/> | Minnesota: <input type="checkbox"/> | New Mexico: <input type="checkbox"/> | Rhode Island: <input type="checkbox"/> | Washington: <input type="checkbox"/> |
| Connecticut: <input type="checkbox"/> | Kansas: <input type="checkbox"/> | Mississippi: <input type="checkbox"/> | New York: <input type="checkbox"/> | South Carolina: <input type="checkbox"/> | West Virginia: <input type="checkbox"/> |
| Delaware: <input type="checkbox"/> | Kentucky: <input type="checkbox"/> | Missouri: <input type="checkbox"/> | North Carolina: <input type="checkbox"/> | South Dakota: <input type="checkbox"/> | Wisconsin: <input type="checkbox"/> |
| Florida: <input type="checkbox"/> | Louisiana: <input type="checkbox"/> | Montana: <input type="checkbox"/> | North Dakota: <input type="checkbox"/> | Tennessee: <input type="checkbox"/> | Wyoming: <input type="checkbox"/> |

PART 3: EQUIPMENT SECTION

NUMBER OF TRUCKS: _____

NUMBER OF TRAILERS: _____ VAN: _____ REEFER: _____ FLATBED: _____ OTHER : _____

ADDITIONAL INFORMATION:



PART 4: RATE OF HAUL INFORMATION

Please give us your minimum rate information. We understand that many factors will change this information, but this will give us a starting point.

IDLE MILE RATE: \$_____.__ (V) \$_____.__ (R) \$_____.__ (F)

MAX PICKS: _____ MAX DROPS: _____ MONEY PER PICK/DROP: _____

ADDITIONAL PREFERENCES

PART 5: INSURANCE INFORMATION SECTION

INSURANCE AGENCY: _____ CONTACT: _____

PHONE: _____ FAX: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

WEBSITE: _____

PART 6: REFERRAL

Please refer us three (3) Owner Operators who you believe might benefit from our service

Name: _____ Phone/Cell: _____

Name: _____ Phone/Cell: _____

Name: _____ Phone/Cell: _____

PART 7: FACTORING INFORMATION SECTION

If you use a factoring service, please provide us the following information. This will ensure that we only use brokers that are approved by your factoring company.

FACTORING: _____ CONTACT: _____

PHONE _____ FAX _____ EMAIL _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

WEBSITE: _____



DISPATCH CARRIER PROFILE

Please list here anything that you do not wish to haul.

Instructions: If you are an OWNER OPERATOR OF A FLEET please complete this form. The better informed we are the better we will be able to assist you. This form should be updated any time your fleet changes. If there are any changes notify us and a new sheet will be provided. This information is for our use only and will not be released to any third party without your express written permission.

TRUCK #	TRAILER #	TRAILER TYPE	MAX WEIGHT	DRIVER NAME	CELL PHONE

Does the assigned driver have the right to make load decisions for you? (Y/N) _____

Does the driver have the right to receive a copy of the load confirmation? (Y/N) _____



CdHcbU CREDIT CARD PAYMENT AUTHORIZATION

I _____, hereinafter called CARRIER do hereby authorize **Carry Da Load United, LLC**, hereinafter called DISPATCH, to initiate a weekly debit entry for the amount listed below, to the credit card account indicated below, in consideration of the dispatching service provided to me. I understand that my signature on this form, along with a photocopy of the front and the back of both my credit card, and my driver license, will allow me the convenience of not having to produce these items for impression at the time of service. Please complete all fields.

Cardholder Name: _____

Credit Card Type: Visa Mastercard Discover American Express

Card Number: _____ **Expiration Date:** _____

CVV Code: _____ (Last 3 Digits located on the back of the Credit Card) **ZIP:** _____

Authorized Weekly Payment Amount:

____ % Per Load (For Dispatching Services)

Authorization shall be in effect upon the date signed by credit card holder and shall be in effect until the cancellation of the Credit Card Payment Authorization or until notice is given to **CDL**. You may cancel this authorization at any time by notifying **CDL** via email at **support@carrydaloading.com**. I, _____ (name), authorize **Carry Da Load United, LLC** to charge my credit card above for agreed upon services. Invoice will be sent out weekly via email. I understand that my information will be saved to file for future transactions on my account. I agree to pay for this service in accordance with the issuing bank cardholder agreement.

Cardholder -- Please Sign and Date

Signature: _____

Date: _____

Return the COMPLETED AND SIGNED FORM to the Following:

Carry Da Load United, LLC
Phone Number: (770) 802-0336; Fax: (470) 745-0711
Email: support@carrydaloading.com

Disclaimer: Please beware and understand that once you drop off your load and the shipper has been invoiced for your services, that you ARE NOT always paid immediately. Some shippers send out payments in 30, 60, and 90 day intervals. While we understand this, you are still required to pay your invoice in the time-frame given as in the packet, unless otherwise agreed upon. If you are a new company or a company without the liquidity to meet expenses, I would strongly suggest you look into a factoring company.



AUTOMATIC PAYMENT AUTHORIZATION FOR FACTORING

_____, owner of
_____, ("Client"), hereby authorizes
_____ ("Factor") to deduct \$ _____ or Percent
(_____%) from each invoice purchased by Factor. Carrier agrees these funds will be placed in
an escrow account by Factor to be disbursed weekly, on Friday, to **Carry Da Load United, LLC**
("Dispatcher") as payment for dispatching services provided by Dispatcher to Client. This
agreement may be cancelled at any time via written notice to all parties.

CARRIER:

COMPANY NAME: _____

CONTACT NAME: _____

CONTACT SIGNATURE: _____

DATE: _____

DISPATCH:

COMPANY NAME: **Carry Da Load United,
LLC**

DISPATCHER NAME: _____

DISPATCHER SIGNATURE: _____

DATE: _____