## **Amrize Detention Form**

Unloading	Loading
Date:	BOL# (Unloading) or P/U# (Loading)
Carrier Name:	Customer Name:
Origin:	Destination:
Detention Details:	
Appointment Time:	
Arrival Time:	
Departure Time:	
Total Hours:	
Reason For Detention:	
In order to validate detention time, please obtain customer (or loader for loading detention) signature and name below.  Customer Name (Please Print):	
Customer Signature:	
Driver Signature:	
Billing Dept. to complete:	
Rate Per Hour: \$	
Total Hours: Free Hours:	Total Billable Hours:
Total Amount Due: \$	