



Acceptance of Estimate

Address: Sarsfield House, Airton Road, Tallaght, Dublin 24, Ireland | Tel: +1 4000 100 | E: info@beverlysmuth.ie

Part 1 - Acceptance of Quotation

Please use block capitals and complete all sections. This form must be returned BEFORE your move starts

I, _____ (insert name) accept your quotation
dated _____ for the provision of removal and storage services.

My requested dates are:

Advance Packing	Collection	Delivery
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Collection Address

Phone/Fax

Delivery Address

Phone/Fax

Part 2 - Request for Insurance Cover

Please tick where applicable

I will arrange my own insurance cover	Yes	No
Please arrange insurance cover on my behalf	Yes	No
I have completed and attached a Valued Inventory Form	Yes	No

Please Note

- (NB) The total market value of goods must be advised regardless of whether you require Beverly Smyth to arrange insurance cover on your behalf.**
- This insurance covers household goods and personal effects being moved and/or stored.
- Intermediate storage, other than that at Beverly Smyth's own warehouse is covered only when temporarily stored in the course of transit.
- Storage in a warehouse at destination is not insured unless cover is requested, agreed by Underwriters and premium paid to Beverly Smyth.
- Please refer to our Summary of Insurance Cover for your guidance and details of excluded goods.
- A Valued Inventory Form must be completed if you would like us to arrange insurance on your behalf. An item is only insured if there is a value stated opposite it in the Valued Inventory Form.

Total Market Value (as detailed on attached Valued Inventory Form)

Part 3 - Payment Terms

I understand that payment must be made in advance of the removal date. I have attached payment for the removal/storage charges, insurance premium and VAT *(if applicable)*

Please invoice *(tick where applicable)*

Me

My Employer

Invoice for the attention of

Address

Phone/Fax/Email:

Please Note

If your Employer is responsible for these charges, please include written confirmation or a purchase order number with this form.

Part 4 - Declaration

I confirm that the goods are my own unencumbered possessions or I am authorised to enter into this contract on behalf of the owner of the goods.

I have read and retained a copy of Beverly Smyth's Conditions of Contract to which I agree.

I have read and retained a copy of the Summary of Insurance Cover to which I agree and to the best of my knowledge and belief, the values as stated represent the current market value of the whole of my goods being removed/stored.

I understand that the insurance policy is subject to an excess of EUR350.00/GBP300.00 and I have read and understand the contract and insurance conditions.

Signature

Date