### **Trucking Delivery Order Form**

**Company Name**:  
**Address**:  
**Phone**:  
**Email**:

#### **Delivery Order Details**

* **Delivery Order Number**:
* **Order Date**:
* **Expected Delivery Date**:

#### **Client Details**

* **Client Name**:
* **Contact Number**:
* **Pickup Address**:
* **Drop-Off Address**:

#### **Vehicle & Driver Details**

* **Truck Type**:
* **Vehicle Number**:
* **Driver Name**:
* **Driver Contact Number**:

#### **Load Details**

| **Item No.** | **Description** | **Weight (kg)** | **Quantity** | **Loading Point** | **Unloading Point** |
| --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |

#### **Payment Details**

* **Payment Method**: (Cash/Invoice/Online Transfer)
* **Amount Paid**:
* **Balance Due**:

#### **Special Instructions**

* **Road Restrictions**:
* **Delivery Time Window**:

#### **Confirmation**

* **Prepared By**:  
  *(Name & Signature)*
* **Driver Acknowledgment**:  
  *(Signature upon loading)*
* **Receiver Acknowledgment**:  
  *(Signature upon delivery)*