



# RAIL RATE REQUEST FORM

## SHIPPER INFORMATION:

Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/PC: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
Contact Email: \_\_\_\_\_  
Facility Rail Served? YES NO  
If yes, served by whom: \_\_\_\_\_

## DESTINATION INFORMATION:

Destination City/State (Prov): \_\_\_\_\_  
Receiver Company Name: \_\_\_\_\_  
Receiver Address: \_\_\_\_\_  
Receiver Contact Name: \_\_\_\_\_  
Receiver Contact Phone: \_\_\_\_\_  
Receiver Contact Email: \_\_\_\_\_  
Facility Rail Served? YES NO  
If yes, served by whom?: \_\_\_\_\_

## FREIGHT INFORMATION:

Commodity/Material/Goods: \_\_\_\_\_  
*(STCC# if known)*

## DIMENSIONS:

Container Length: \_\_\_\_\_  
Container Width: \_\_\_\_\_  
Container Height: \_\_\_\_\_  
Container Weight (Loaded): \_\_\_\_\_

## RAIL CAR INFORMATION:

What type of rail car is required?  
Boxcar      Coil Car      Flat      Gondola      Hopper      Tank  
Other: \_\_\_\_\_  
Will you use Railway owned cars? YES NO  
*(Will be provided by Rail Company if unknown)*

## RAIL CARRIER INFORMATION:

Origin carrier: \_\_\_\_\_  
Destination carrier: \_\_\_\_\_

**Please send completed request forms to:**  
Sandy Durand, Traffic Manager  
Essex Terminal Railway  
Phone: 519-977-1506 ext. 225 Fax: (519) 973-7234  
Email: [sdurand@etr.ca](mailto:sdurand@etr.ca)

**Please note:** Rate requests will be shared with main line rail companies (i.e. CN, CP, CSX) and rates will be sent directly to you. ETR is not privy to information you receive regarding rates from other rail lines.