

CUSTOMER CONTACT INFORMATION



In order for us to maintain communication throughout your move, please complete the following information and return to DeWitt Companies **prior to your upcoming move.**

YOUR CONTACT INFORMATION AT ORIGIN

Name: _____	Date of Arrival: _____
Origin City: _____	E-mail Address: _____
Destination: _____	Will you have access to this email address during your relocation?
Date of Move: _____	YES <input type="checkbox"/> NO <input type="checkbox"/>

DESTINATION'S HOTEL CONTACT INFORMATION (IF APPLICABLE)

Hotel Name: _____	Hotel Phone: _____
Hotel Address: _____	Hotel Fax: _____
Hotel City: _____	Arrival Date: _____

YOUR CONTACT INFORMATION AT DESTINATION

Address: _____	City: _____
Country: _____	Phone Number: _____
Destination: _____	Alt Phone Number: _____
Date of Move: _____	Alt Email Address: _____

CONTINUE ➔

**DESTINATION CONTACT INFORMATION
(IF DIFFERENT THAN THE ABOVE)**

Name of Business or Individual: _____

Address: _____

City: _____

Country: _____

Phone Number: _____

**BILLING ADDRESS AND CONTACT
(IF DIFFERENT THAN THE ABOVE)**

Name: _____

Company: _____

Address: _____

Phone Number: _____

PLEASE RETURN THIS DOCUMENT TO THE FOLLOWING

Dewitt Moving & Storage Guam
165-I Guerrero Street, Suite 100
Tamuning, Guam 96913

Fax: (671) 646-0034