# **Comprehensive Logistics Service Agreement**

Date: [Insert Date]

Parties:

[Client's Name] [Client's Address] [City, State, Zip Code]

and

[Logistics Provider's Name] [Logistics Provider's Address] [City, State, Zip Code]

### 1. Scope of Services

The Logistics Provider agrees to provide the following services:

- Transportation
- Warehousing
- Inventory Management
- Customs Clearance

#### 2. Duration

This agreement shall commence on [Start Date] and shall continue until [End Date], unless otherwise terminated in accordance with the terms herein.

## 3. Compensation

The Client agrees to pay the Logistics Provider the sum of [Amount] for the services rendered under this agreement. Payment terms are as follows:

• [Payment Terms]

#### 4. Liability

The Logistics Provider shall be liable for any loss or damage arising from their negligence or failure to comply with the agreed terms.

### 5. Governing Law

This agreement shall be governed by the laws of [State/Country].

# IN WITNESS WHEREOF

The parties hereto have executed thi first above written.	s Comprehensive Logistics Service Agreement as of the date
[Client's Name]	•
[Client's Title]	
[Logistics Provider's Name] [Logistics Provider's Title]	