



## CREDIT APPLICATION

BUSINESS NAME: \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

TRAFFIC MANAGER: \_\_\_\_\_ TRAFFIC PHONE #: \_\_\_\_\_

TRAFFIC FAX #: \_\_\_\_\_ TRAFFIC EMAIL: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

AP MANAGER: \_\_\_\_\_ AP PHONE #: \_\_\_\_\_

AP FAX #: \_\_\_\_\_ AP EMAIL: \_\_\_\_\_

WOULD YOU LIKE TO RECEIVE INVOICES VIA EMAIL? \_\_\_\_\_ Y/N

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

WOULD YOU LIKE TO USE OUR CUSTOMER PORTAL TO TRACK SHIPMENTS, VIEW INVOICES AND SUBMIT ONLINE PICK UP REQUESTS? \_\_\_\_\_ Y/N

BUSINESS TYPE:

CORP \_\_\_\_\_ SOLE PROP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ STATE OF \_\_\_\_\_

BANK REFERENCE: \_\_\_\_\_ BANK PHONE: \_\_\_\_\_

CHECKING ACCT#: \_\_\_\_\_

SAVINGS ACCT#: \_\_\_\_\_

FEDERAL ID# \_\_\_\_\_ OR SS# \_\_\_\_\_

TRADE REFERENCES:

NAME	ADDRESS	PHONE	FAX
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SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_