



## APPLICATION FOR CREDIT

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

D/B/A \_\_\_\_\_ For Past \_\_\_\_\_ Years

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Former Business Address (If applicable)

\_\_\_\_\_

Federal Tax ID Number \_\_\_\_\_

**OWNERSHIP:**  Sole Owner  Partnership  Corporation

Date Started/Incorporation Date \_\_\_\_\_

Have you ever operated under a different name?  Yes  No

If yes, give name and address \_\_\_\_\_



**TRADE REFERENCES:** (Minimum of 3)

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Contact Name \_\_\_\_\_ Acct# \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Contact Name \_\_\_\_\_ Acct# \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Contact Name \_\_\_\_\_ Acct# \_\_\_\_\_

**BANK REFERENCE:**    Checking    Savings    Loan

Name \_\_\_\_\_ Acct. \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_



**Applicant's signature attests financial responsibility, ability, and willingness to pay our invoices in accordance to terms. A service charge of 1 ½% per month, which is an annual rate if 18%, will accrue 30 days after invoice date.**

**I authorize you to contact references and to obtain information from outside resources that may be needed to obtain credit. The application has been carefully prepared by the undersigned and is to my knowledge complete, accurate, and truthful. I also acknowledge that I understand and agree to the pricing and collection policies relating to Carload Express, Inc. and it's affiliated railroads.**

**IF MY ACCOUNT IS ACCEPTED, I AGREE TO PAY ACCORDING TO YOUR TERMS OF SALE. I FURTHER AGREETO PAY ALL COLLECTION COSTS AND EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEES INCURRED BY YOU IN COLLECTING OR ATTEMPTING TO COLLECT SUCH ACCOUNT.**

\_\_\_\_\_  
Company name

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date