



Credit Application & Agreement

Company Information

Company Name _____ Date: _____

Mailing Address _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

Business Phone _____ Business Fax _____

D & B Numer (Dunn and Bradstreet) _____ Web Site _____

Organizational Type (check one) Corporation LLC Partnership Sole Prop. Governmental

Type of Business: _____ Date Business Started: _____

Federal Tax ID Number _____ Tax Exempt **YES** or **NO** (if yes, please provide certificate)

Purchase Order Numbers are Required: **YES** or **NO** (please circle one)

Accounts Payable Contact: _____ Phone Number: _____ e-mail Address: _____

Officers & Owners

Name: _____ Title: _____ Address: _____ City/State/Zip

Name: _____ Title: _____ Address: _____ City/State/Zip

Bank Information

Name: _____ Bank Contact Name: _____ Acct # _____

Address: _____ Phone Number: _____

City/State/Zip _____ Fax Number: _____

Trade Reference #1

Company Name: _____ Account Number: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____ E-Mail: _____

Trade Reference #2

Company Name: _____ Account Number: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____ E-Mail: _____

Trade Reference #3

Company Name: _____ Account Number: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____ E-Mail: _____

Credit Terms:

All invoices are due and payable within **fifteen** (15) days from date of invoice.

Finance charges as outlined in the **Forwarder of Record Rules and Regulations** shall be applied to unpaid invoices. The Shipper (USPPI) warrants payment of all charges on any pre-paid, collect or 3rd party billing for collection of unpaid shipments.

(click here to access and/or download a copy of the Forwarder of Record Rules and Regulations)

In the event of delinquency, Anderson Cargo Services may impose a financial charge of one and one half percent per month on the delinquent balance until paid in full. All collection expenses and attorney's fees in connection with the collection of the delinquent debt shall be due and payable by the applicant.

Applicant authorizes creditor to contact financial and trade references (including those listed herein) and any credit reporting agencies to obtain, verify and re-verify credit information.

The applicant certifies under penalty of perjury that the statements contained in the application are true and correct. Applicant understands that the seller intends to rely on the information presented in the application in determining its credit worthiness.

Signature by Company Officer:

If the terms and conditions set forth above meet with your approval, please indicate same below by your signature. By doing so, you are acknowledging that you fully accept and agree to Anderson Cargo Services' terms and conditions for approval of credit and certify that the above information is true and correct.

Please Print Name Here: _____

Authorized Signature: _____ Title: _____ Date: _____

Please Fax this Signed Application to our Secure Fax Line at: 651-209-0039

Verification of References

Reference #1: _____ City/State _____ Checked By: _____ Date: _____

Reference #1: _____ City/State _____ Checked By: _____ Date: _____

Reference #1: _____ City/State _____ Checked By: _____ Date: _____

Credit Determination:

Credit Approved By: _____ Credit Refused By: _____

Special Comments/Opinion(s)

