



Credit Application

Company Information

Company Name

Billing Address (Street Address / PO Box)

City

State

Postal Code

Physical Address (No PO Boxes)

City

State

Postal Code

Telephone #

Fax #

Company President

Controller

Accounts Payable Contact

Federal ID Number

D & B # (Dunn & Bradstreet)

Corporation Partnership Sole Proprietor Other (specify)

(If Other Please Specify)

Parent Company

Branches

Years in Business

Freight Payment Schedule NET

Has ownership changed within the last year?

YES

NO

Are you on schedule with your payments now?

YES

NO

Industry Type



Banking Information

Bank Name

Contact

Telephone #

Line Of Credit Account #

Account # (1)

Account # (2)

Name of Approving Company Officer

Title of Approving Company Officer

I authorize the aforementioned bank to release references to Freightways and authorize the use of references between Freightways and their third party creditors. The banking information provided is confidential and is only supplied to Freightways for the purpose of determining credit. Freightways is authorized to send or receive this information to/from third party creditors via electronic transport, mail and facsimile. I have the authority to agree to the above mentioned terms.

I agree to the statements listed above: YES NO



References

Reference # 1 -----

Company Name

Contact Person

City

State

Postal Code

Telephone #1

Telephone #2

Reference # 2 -----

Company Name

Contact Person

City

State

Postal Code

Telephone #1

Telephone #2

Reference # 3 -----

Company Name

Contact Person

City

State

Postal Code

Telephone #1

Telephone #2