

Confidential Credit Application for Transportation and Related Charges

Legal Business Name _____	Sole Proprietorship _____ Partnership _____
Address _____	Corporation: Private _____ Public _____ Other _____
Billing Address (if different) _____	Bankruptcy: Y/N _____ Date _____ Chapter _____
City, State, Zip _____	Phone (____) _____
Subsidiary or Division of _____	Fax (____) _____
Parent or Home Office Address _____	Date Established _____
Type of Business _____	Number of Employees _____
Annual Revenues _____	Financial Officer/Controller _____
Annual Income _____ Net Worth _____	Federal ID # _____
President/Principal _____	Estimated Monthly Credit Requirement _____
Accounts Payable Contact _____	A/P Phone (____) _____
Website _____	Email Address _____
Dun & Bradstreet # _____	SIC# _____

TRADE REFERENCES (please include at least two motor carriers)

1. Name _____	Phone _____
Address _____	Contact _____
2. Name _____	Phone _____
Address _____	Contact _____
3. Name _____	Phone _____
Address _____	Contact _____
4. Name _____	Phone _____
Address _____	Contact _____

CURRENT FINANCIAL INFORMATION
Financial statements will be of great assistance to us in establishing a credit limit for you. Melton's request for a copy of your most recent financial statement is hereby:
Complied with _____ Refused _____

TRANSPORTATION ORGANIZATIONS ONLY
Your company is a: Motor Carrier _____ Broker _____ Other _____
M C # _____ Please forward operating authority, surety bond, and insurance.

BANKING INFORMATION

Bank Name _____ Phone (____) _____
Address _____
Bank Officer _____ Account # _____

On behalf of the company, I certify that we are familiar with and agree to abide by the Interstate Commerce Act, and Recodifications thereof, pertaining to the payment of transportation and related charges. I hereby grant permission to the above referenced bank and credit references to release pertinent information regarding our accounts to Melton Truck Lines, Inc. Furthermore, my signature attests to the financial responsibility, ability, and willingness to pay all transportation and related charges within 15 days of the date invoiced.

Name Title Date