



Logistic Leaders Sales Rep & Phone #: _____ Date: _____

COMMERCIAL CREDIT APPLICATION

Please return the completed application to your Logistic Leaders Sales Representative

Legal Name:					
Trade Name / DBA:					
Legal Address:					
Billing Address:					
Business Phone:	Business Fax:	Website:			
A/P Contact Name:	A/P Ph#:	A/P Email:			
Circle Type of Business:	Corporation	Partnership	Sole Proprietor	LLC	Other
Date Company Established/Incorporated:	In What State?				
Federal Tax ID#:	D&B Number:				

PRINCIPALS OR OWNERS:

Name	Address/Phone#	Title
1) _____	_____	_____
2) _____	_____	_____

TRADE REFERENCES

- 1) Name: _____ Phone #: _____ Fax #: _____
- 2) Name: _____ Phone #: _____ Fax #: _____
- 3) Name: _____ Phone #: _____ Fax #: _____

BANK REFERENCE

- 1) Name: _____ Phone #: _____ Fax #: _____ Acct# _____

Credit Authorization and Affirmation of Agreement

Applicant and any guarantor ("we") certify that the foregoing information is complete, accurate, and voluntary for the purpose of obtaining credit in connection with our business and agree to be bound by the provisions of this application and agreement. We authorize the subsidiaries of Logistic Leaders, Inc. and their agents to investigate our credit history in any manner and from any source deemed appropriate in our circumstance. If granted credit, we agree to make payments in accordance with Logistic Leaders' normal terms, as stated above. Should we exceed the given credit limit or the account becomes past due, we understand that Logistic Leaders has the right to refuse or cancel any/all orders or shipments until the account is satisfied in full. We also understand that Logistic Leaders has the right to take any necessary steps to collect the amount owed. The applicant and guarantor further agree to the release of credit information, including the reporting of credit history to credit reporting agencies consistent with the Fair Credit Reporting Act, 15 U.S.C. §1681, et seq., as amended. This authorization shall be continuing without expiration and a photocopy or facsimile copy shall be given the same effect as the original.

Signature _____ Title _____ Date _____