



#3 Crafton Square, Pittsburgh PA 15205 | Phone 800-223-8973 | Fax 412-920-1899

CREDIT APPLICATION

Company Information

Name of Business:		Tax I.D. Number:	
Legal Form Under Which Business Operates: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>			
Type of Business:		In Business Since:	
Physical Address:			
City/ State/ZIP:		Phone:	Fax:
Billing Address:			
City/ State/ZIP:		Phone:	Fax:

Bank References

Institution Name:	Contact:
Checking Account #:	Phone:

Trade References

Company:	Company:	Company:
Contact:	Contact:	Contact:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

TERMS OF SALE

1. Payments for all shipments are due 30 days from the date the shipment is invoiced and are past due thereafter.
2. I understand there is a SERVICE CHARGE of 1.5% per month (ANNUAL PERCENTAGE RATE of 18%) that will be charged on any balance not paid by the 45th day following invoice date. SERVICE CHARGE is added to principal that is compounded daily. Applicant and/or guarantor/s agree to pay such SERVICE CHARGES. Applicant and/or guarantor/s agree to pay all actual cost of collection including actual attorney's fees, court costs and or collection agency fees due to applicants' or guarantors' breach of the terms of sale, whether or not a lawsuit is brought to satisfy the debt owed to Carrier by applicant or guarantor/s. In the event that any suit or collection action is required to enforce the terms of this Credit Application and to collect unpaid account balances owing to Carrier, the undersigned agrees that jurisdiction and venue for any such action shall not be limited to the state and county in which the materials, goods or services are purchased or received. The undersigned also agrees and submits to the jurisdiction of the Pennsylvania courts, and agrees that at Carrier's sole option, the proper venue for any such collection action may include Pittsburgh and Allegheny County, Pennsylvania.
3. All sales are subject to all other terms set forth on the pertinent Bill of Lading, Rate Confirmation or invoice relating to the particular sale.
4. ACCOUNT BALANCES 60 DAYS AND OLDER ARE SUBJECT TO A CREDIT HOLD AND MAY BE REPORTED TO INDUSTRY TRADE GROUP ASSOCIATIONS.
5. Applicant and/or guarantor/s agree to pay to Carrier a service charge equal to but not greater than the legally acceptable amount on all dishonored checks returned to Carrier by its bank.

Signature _____ Printed/Title _____



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BILLING INFORMATION (TO BE COMPLETED BY ACCOUNTS PAYABLE DEPARTMENT CONTACT)

- Do you prefer each invoice and proof of delivery to be mailed emailed other (specify below)
Specify additional required documentation below.
- Please provide the following Accounts Payable information:

- Billing Address (if different than page one):

- Email Address: _____

- Fax Number: _____

- We require payment within 30 days of invoicing.
- Payments can be remitted to PO Box 912394, Denver CO 80291
If your company has the ability to pay via ACH/EFT, please email set-up paperwork to james.perry@shiprrexp.com (James Perry, Credit Manager)
- Please add any special instruction, additional requirements, comments below:

Company Name: _____

A/P Contact Name & Title: _____

Signature: _____ Date _____