



Credit Application

Company / Business Contact Information

Company Name: _____ Years in Business: _____

Address: _____ Fed ID Number: _____

City, State, Zip: _____ D-U-N-S Number: _____

Primary Contact: _____ Title: _____

Phone: _____

E-mail: _____

Owner or President's name: _____

Partnership LLC Sole Proprietorship Corporation (State) _____ subsidiary/division (Parent Company) _____

Billing Information

Billing/Mailing Address: _____

City, State, Zip: _____

A/P Contact: _____

Phone: _____ Ext: _____ E-mail: _____

Billing Requirements: _____

Business and Credit Information

Bank Name: _____ Address: _____

Contact: _____ Phone: _____

Account Number: _____

Trade References (may include a corporate fact sheet if available)

Company Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Contact: _____ E-mail: _____

Company Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Contact: _____ E-mail: _____

Company Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Contact: _____ E-mail: _____

We prefer to contact references in writing. It will help immensely if you can provide email and/or fax for each reference.

Terms are net 30 days. Failure to pay billed charges may result in a lien on future shipments, including the cost of storage and appropriate security for the subsequent shipment held pursuant to California Civil Code 3051.5 and Hawaii Code 271-28.5. In case of litigation, the prevailing party may recover reasonable costs from the other party. Applicant's signature warrants that the above information is true and accurate. By submitting this application you authorize Aloha Freight Forwarders to make inquiries into the banking and business/trade references you have supplied. Submission of this application is not a commitment to allow credit and for any specific time limit. Credit may be rescinded upon twelve months of inactivity.

Authorized Signature/Name _____ Title _____ Date _____

1800 S Anderson Ave. Compton, CA 90220

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