



# AIR & SURFACE LOGISTICS

## Account Application and Agreement

800-832-1207 • 800-456-0490 Fax  
www.airandsurface.com

Please **PRINT** or **TYPE**. The entire application **MUST** be complete before it can be processed.

GENERAL BUSINESS INFORMATION				
Company Name	<input type="checkbox"/> New Customer <input type="checkbox"/> Existing Customer (Acct# _____)			
Trade name/d.b.a.	Estimated shipments per month			
SHIPPING INFORMATION				
Contact Name	Phone #			
Street Address	Fax #			
City/State/ZIP	Email			
BILLING INFORMATION				
<input type="checkbox"/> Bill my credit card - <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX	Card #	Expires		
<input type="checkbox"/> Send an Invoice	By providing your credit card number, you authorize us to bill your credit card.			
Contact Name	Phone #			
Street Address	Fax #			
City/State/ZIP	Email			
OWNERSHIP INFORMATION				
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Individual	If corporation, year & state
BANKING/FINANCE INFORMATION				
Bank name	Account #	Phone #		
Contact	Federal Tax ID#			
City/State/ZIP	Dun & Bradstreet #			
Have you, or a business controlled by you, ever declared bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No				
TRADE REFERENCES				
Name	Acct#	Ph#	Contact	
Name	Acct#	Ph#	Contact	
Name	Acct#	Ph#	Contact	
AMOUNT OF CREDIT REQUESTED*				
\$ _____	* (required)	Terms are Net 10	Initial _____	
AUTHORIZATION				
Authorized Company Representative (print)	Title			
Signature of Applicant	Date			
<p>In signing this application, I certify that all of the information on this form is correct and that I fully understand the credit terms and the <b>Terms &amp; Conditions</b> of carriage as detailed on the Air &amp; Surface Logistics Web site at <a href="http://www.airandsurface.com">www.airandsurface.com</a>. I agree to keep our account current in consideration of the credit extended. I understand all invoices are due and payable 10 days from the date of invoice. My signature personally guarantees, in the event that this account is collected through a collection service, through litigation, by an attorney or under advice therefrom, that the applicant agrees to pay all costs, including late fees and attorney fees. In addition, my signature authorizes the release of all credit and account information from any reference or credit-reporting agency for the purposes of establishing a credit account.</p>				
<p><b>Please fax or email this completed application to:</b>  <b>Attn: Accounting – 800-456-0490 (fax) or <a href="mailto:accounting@airandsurface.com">accounting@airandsurface.com</a>.</b></p>				