

CREDIT APPLICATION

WATKINS AND SHEPARD TRUCKING, INC.
1500 BLAINE
Helena, MT 59601
(406) 442-9536 Fax: (406) 532-6641

CUSTOMER NAME _____

SHIPPING ADDRESS _____ BILLING ADDRESS _____

CITY, STATE & ZIP _____ CITY, STATE & ZIP _____

PHONE # _____ FAX # _____

EMAIL ADDRESS _____

PLEASE CHECK ONE: Corporation () Partnership () Sole Proprietorship () LLC ()

NAME OF OFFICERS, PARTNERS OR INDIVIDUALS:

NAME _____ DRIVERS LICENSE # OR SSN _____

TITLE _____

NAME _____ DRIVERS LICENSE # OR SSN _____

TITLE _____

TYPE OF BUSINESS _____ BILLING REQUIREMENTS(ie BOL,email inv) _____

HOW LONG IN BUSINESS _____ D & B# _____

BANK REFERENCE _____ ACCTS PAYABLE CONTACT _____

BRANCH ADDRESS _____ ACCTS PAYABLE EMAIL _____

If your bank requires you to give authorization before releasing information, have you given it? YES () NO ()

CREDIT REFERENCES: (Preferably Transportation Companies.)

TRUCKING COMPANY _____ PHONE _____

ADDRESS _____ FAX # _____

CONTACT _____

TRUCKING COMPANY _____ PHONE _____

ADDRESS _____ FAX # _____

CONTACT _____

TRUCKING COMPANY _____ PHONE _____

ADDRESS _____ FAX # _____

CONTACT _____

Invoices are due and payable 30 days from invoice date, in accordance with ICC Regulations. Delinquent invoices will be subject to a late charge of 1 1/2% per month, 18% per annum, should collection become necessary, customer will be charged all collection or legal fees associated with collections. Please be advised that failure to pay billed freight charges when due may result in a lien on future shipments, including the cost of storage and appropriate security for such future shipments held. Your timely payment of freight charges is greatly appreciated.

I hereby authorize WATKINS AND SHEPARD TRUCKING, INC., or any credit bureau or other investigative agency employed by us, to obtain bank, vendor, other credit references and personal credit information on owners, officers, directors or guarantor(s) as deemed necessary to establish credit and financial responsibility. I certify that all statements in this application are true and complete and are made for the purpose of obtaining credit.

Signature _____ Date _____

Name _____ Title _____

If this completed application is not received by us within 14 days from the date of this letter, temporary credit will be cancelled and payment in advance will be required on future shipments.