

APPLICATION FOR CREDIT

I. COMPANY: INCORPORATED NAME			DATE		
PLEASE PRINT OR DBA/PARENT	ТҮРЕ				
COMPANY		TELEPHON	IE		
		FAX NU	MBER		
STREET ADDRESS		YEARS IN BU	YEARS IN BUSINESS		
CITY		STATE	ZIP		
EMAIL ADDRESS		IATA#_			
TYPE OF BUSINESS	S:	IAC#_			
	CORPORATION	STATE OF INCORPORATION _			
		ORATION TAX I.D. NUMBER_			
	PARTNERSHIP	FMC#_			
	SOLE PROPRIETORSHIP	DUNS #_			
II. PRINCIPALS:					
1. NAME		TITLE			
HOME ADDRESS			PHONE		
2. NAME		TITLE			
HOME ADDRESS_			PHONE		
AUTHORIZED SIG	NATURE		DATE		

III. BANK REFERENCE:				
BANK NAME				
OFFICER TO CONTACT				
ADDRESS	CITY	ZIP		
PHONE NUMBER	FAX NUMBER	_FAX NUMBER		
IV. TRADE REFERENCES: PLEASE LIST AT LEAST THREE US REFERENCES A	ND PROVIDE INFORMATION REG	QUESTED.		
COMPANY NAME	PHONE NUMBER			
ADDRESS	FAX NUMBER			
CITY, STATE, ZIP				
ACCOUNT NUMBER/ CONTACT PERSON				
COMPANY NAME	_PHONE NUMBER			
ADDRESS	FAX NUMBER			
CITY, STATE, ZIP				
ACCOUNT NUMBER/ CONTACT PERSON				
COMPANY NAME	PHONE NUMBER			
ADDRESS	FAX NUMBER	FAX NUMBER		
CITY, STATE, ZIP				
ACCOUNT NUMBER/ CONTACT PERSON				
COMPANY NAME	PHONE NUMB	ER		
ADDRESS	FAX NUMBER	FAX NUMBER		
CITY, STATE, ZIP				
ACCOUNT NUMBER/ CONTACT PERSON				
AMOUNT OF CREDIT REQUESTED \$ PRIMARY DESTINATIONS				

Applicant agrees to pay any collections costs incurred to collect the account balance, including court costs, collection fees and attorney's fees of not less than 33% of the unpaid principle and interest. As an inducement to grant credit, the undersigned agrees to the need for verification of all information on this application and authorizes, and releases all banks, businesses, and persons identified on this application to furnish and all information requested by Four Star Cargo, Inc. or its representatives, by telephone or written correspondence, whichever Four Star Cargo, Inc. requests. The undersigned warrants that the information is true and correct. The undersigned has the right to authorize the release of such information to Four Star Cargo, Inc. and authorize the release of such information by signature here. An interest rate of 1.5% per month on the unpaid balance will be charged on all accounts with an outstanding past due balance. (NAME) (TITLE) (SIGNATURE) (DATE) **PERSONAL GUARANTEE** In consideration of credit being extended by Four Star Cargo, Inc. to the above named applicant, the undersigned guarantees each contract to , the faithful payment, when due, of all accounts of the applicant. The undersigned guarantor expressly waives all notice of acceptance of this quarantee, notice of extension of credit to applicant, presentment or demand for payment and any notice of default by applicant and all other notices guarantor might otherwise be entitled. NAME (PRINT) NAME (SIGNATURE) **ADDRESS** PHONE Return completed & signed application via fax to (305) 477-0790 or via e-mail info@fourstarcargo.com CREDIT DEPARTMENT USE ONLY CREDIT LINE REQUESTED \$_____ CREDIT LINE APPROVED \$_____ APPROVED BY ______ TITLE_____