



Corporate Accounting Department: 9449 Eighth Street Rancho Cucamonga, CA 91730 - Phone: (909) 652-5180 Fax: (909) 652-5085

CREDIT APPLICATION

DATE: \_\_\_\_\_

COMPANY: \_\_\_\_\_ DIVISION OF: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

CONTACT: ( ) \_\_\_\_\_ NO. OF EMPLOYEES: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

YEARS IN BUSINESS: \_\_\_\_\_ INCORPORATED:  YES  NO MC #: \_\_\_\_\_

PRESIDENT: \_\_\_\_\_ FED I.D.# \_\_\_\_\_

ANNUAL SALES: \$ \_\_\_\_\_ PAYMENT TERMS: \_\_\_\_\_

BANK/BRANCH: \_\_\_\_\_ OPENING DATE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ AVG. BALANCE \$ \_\_\_\_\_

ACCT. #: \_\_\_\_\_ SATIS:  YES  NO RETURNS:  YES  NO

CONTACT: \_\_\_\_\_ LOANS: \_\_\_\_\_

(1) CARRIER REFERENCE: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

ADDRESS/CITY/STATE/ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ CONTACT: \_\_\_\_\_

HIGH: \_\_\_\_\_ TERMS: \_\_\_\_\_ PAY: \_\_\_\_\_

(2) CARRIER REFERENCE: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

ADDRESS/CITY/STATE/ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ CONTACT: \_\_\_\_\_

HIGH: \_\_\_\_\_ TERMS: \_\_\_\_\_ PAY: \_\_\_\_\_

(2) CARRIER REFERENCE: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

ADDRESS/CITY/STATE/ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ CONTACT: \_\_\_\_\_

HIGH: \_\_\_\_\_ TERMS: \_\_\_\_\_ PAY: \_\_\_\_\_

I hereby agree to the payment terms as set forth by MEGATRUX TRANSPORTATION, INC., and acknowledge payment terms as Net 30. In addition, I understand any past due accounts are subject to a service charge of 1 -1/2% per month (18% Annual Rate). In the event action is required to collect my debt, I, the customer, will be responsible for any attorney fee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_