



AMERICAN CARGO
is a certified Service Disabled
Veteran Owned Small Business

Commercial Credit Application

Please provide the following information and return to:

American Cargo Expeditors Freight, Inc., ATTN: Accounts Receivable, FAX: 651-289-3206

COMPANY NAME: _____ DATE: _____

ADDRESS: _____

ADDRESS: _____

PHONE: _____ FAX: _____

HOW LONG AT CURRENT ADDRESS: _____ HOW LONG IN BUSINESS: _____

OWNER/PRESIDENT: _____

FEDERAL TAX ID or SOCIAL SECURITY NUMBER: _____

CHIEF FINANCIAL OFFICER: _____

BANKING INFORMATION

BANKING INSTITUTION: _____ ACCT #: _____

BANK ADDRESS: _____

PHONE #: _____ HOW LONG WITH THIS BANK? _____

CONTACT NAME: _____ PHONE #: _____

BUSINESS/TRADE REFERENCES (PLEASE PROVIDE AT LEAST 3)

1) _____
Company Name Contact Name Phone Number

2) _____
Company Name Contact Name Phone Number

3) _____
Company Name Contact Name Phone Number

The information furnished above, on this Commercial Credit Application, is correct and is provided in order to obtain credit. I authorize American Cargo Expeditors to certify and to obtain or exchange credit information with Banks, Business references and Trade references to verify above information.

Terms of Credit are NET 15 days

Signature: _____

Title: _____

Date: _____

Personal Guarantee

I understand that this is a guarantee that shall cover charges arising from shipments tendered to American Cargo. I guarantee that charges will be paid in required terms.

Signature: _____

Title: _____

Date: _____