

Confidential Credit Application for Transportation and Related Charges

Legal Business Name	Sole Proprietorship Partnership
Address	Corporation: Private Public Other
Billing Address (if different)	Bankruptcy: Y/N DateChapter
City, State, Zip	Phone ()
Subsidiary or Division of	
Parent or Home Office Address	
Type of Business	
Annual Revenues	
Annual Income Net Worth	Federal ID #
President/Principal	Estimated Monthly Credit Requirement
Accounts Payable Contact	A/P Phone ()
Website	Email Address
Dun & Bradstreet #	
1. Name Address 2. Name	Contact
Address	
3. Name	
Address	
4. Name	
Address	
CURRENT FINANCIAL INFORMATION Financial statements will be of great assistance to us in establishing a credit limit for you. Melton's request for a copy of your most recent financial statement is hereby: Complied with Refused	TRANSPORTATION ORGANIZATIONS ONLY Your company is a: Motor Carrier Broker Other M C # Please forward operating authority, surety bond, and insurance.
ВА	ANKING INFORMATION
Bank Name	Phone ()
Address	
Bank Officer	Account #
	e Interstate Commerce Act, and Recodifications thereof, pertaining to the payment of transportation and related charges. elease pertinent information regarding our accounts to Melton Truck Lines, Inc. Furthermore, my signature attests to the harges within 15 days of the date invoiced.
Name	Title Date