



NVOCC/IFF

CREDIT APPLICATION

NAME/ADDRESS

Business or Corporate Name: _____ Federal ID #: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

COMPANY INFORMATION

Type of Business: _____ In Business Since: _____

Legal For Under Which Business Operates:

Corporation

Partnership

Proprietorship

If Division/Subsidiary, Name of Parent Company: _____

A/P CONTACT

Person we should contact concerning payment questions: _____

A/P Phone: _____ A/P Fax: _____ A/P Email: _____

Please indicate your company's payment terms:

Due upon receipt

Net 7

Net 15

Net 30

Other: _____

BANK REFERENCES

Institution Name: _____ Contact: _____

Account #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____



NVOCC/IFF

TRADE REFERENCES

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Terms and Conditions

1. Applicant shall make payment within 15 days from invoice date. Past due accounts shall be assessed a finance charge of 1.5% per month, compounded daily.
2. In the event that any account is not paid when due and legal action is commenced, Avenue shall be entitled to its reasonable attorney fees and court costs, including any cost of appeal.
3. It is understood that Avenue is an arranger of freight services only and as such the total aggregate liability of Avenue under this agreement, regardless of the basis of liability or the form of action, will in no event exceed the total service fee charged by Avenue in respect of the shipment in dispute.
4. Applicant authorizes Avenue or its agents to conduct or cause to be conducted, a credit investigation on a continuing basis to substantiate a line of credit.
5. This Agreement shall be governed by the laws of the State of California and the parties hereby at torn to the jurisdiction of State of California in the event of any dispute.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in the credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Signature: _____ Date: _____

Print Name: _____ Title: _____