



## CREDIT APPLICATION

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

EXACT LEGAL NAME \_\_\_\_\_

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

DATE ESTABLISHED \_\_\_\_\_ IRS/SOCIAL SECURITY # \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

**PRINCIPAL RESPONSIBLE FOR BUSINESS TRANSACTIONS:**

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ PHONE \_\_\_\_\_

**BANK REFERENCES:**

NAME OF BANK \_\_\_\_\_ CONTACT \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ PHONE # \_\_\_\_\_ FAX# \_\_\_\_\_

**TRADE REFERENCES:**

COMPANY NAME \_\_\_\_\_ CONTACT \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ CONTACT \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ CONTACT \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

**AUTHORIZATION**

OFFICER'S SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**By signing this application, I authorize Estes Forwarding Worldwide LLC to contact all parties named above and give permission for them to release information. I warrant that the information given in this credit application is correct and true and I have the authority to sign on behalf of the business listed above.**

**Estes Forwarding Worldwide LLC may also contact credit reporting agencies to assist in extension fo credit. All credit is extended at the sole discretion of Estes Forwarding Worldwide LLC who may increase, decrease or terminate any credit availability at any time.**

**All information is held in strict confidence. Should there be a breach or default by applicant, costs and expenses involved with collecting the debt shall be at the expense of the applicant.**

**By signing this credit application, applicant is agreeing to all terms and conditions set forth on the Estes Forwarding Bill of Lading. Payment terms are due within 30 days of receipt of invoice.**

**Mail payments to:**

**Estes Forwarding Worldwide LLC  
P.O. Box 26206  
Richmond, VA 23260**

**Contact: Vince Radford  
855-433-9669, Option 5 - Toll Free  
Fax - 804-230-4605**