



APPLICATION FOR CREDIT

Company: _____ DBA: _____

Billing Address: _____ City/State/Zip: _____

Street Address: _____ City/State/Zip: _____

Phone(s): _____ Fax: _____

President: _____ Finance Mgr.: _____

Year Business Started: _____ Years at Present Address: _____ Business Industry: _____

Average Monthly Transportation Charges: \$ _____

Corporation Partnership Proprietor LLC

Email address(s) for invoices: _____

Accounts Payable contact: _____ Accounts Payable Phone: _____

TRADE REFERENCES

(Please include a transportation reference)

Company name: _____ Address/City/State: _____ Telephone/Fax: _____

1. _____

2. _____

Bank Reference

Name: _____ City/State: _____

Contact/Phone#: _____ Account #: _____

The undersigned agrees that if credit is extended by Peninsula Truck Lines, our terms supersede any shipping order sent. Payment will be made in accordance with our **"Terms & Conditions of Sale"** as published on the **Customer/Carrier Pricing Agreement**. *Peninsula Truck Lines reserves the right to charge 18% per annum on all overdue invoices.* In the event it becomes necessary to engage legal assistance to collect on an overdue account, the undersigned agrees to pay interest at 18% per annum, or at the highest rate authorized by law, plus all collection and attorney fees. If a lawsuit is commenced we agree to venue in Seattle, King County, Washington at the option of Peninsula Truck Lines and waive the right to litigate outside King County. I/We consent to inquiry of our bank, trade references and to obtain our personal credit report to evaluate and update credit worthiness.

Signature _____ Date _____

Print Name _____ Title _____

12/2018

Return Fully Completed Application To:
Peninsula Truck Lines, Inc.
PTLAccounting@Peninsulatruck.com
Phone (253) 929-2000 Fax (253) 929-2041