



5990 Stoneridge Drive ▪ Suite 118 ▪ Pleasanton ▪ CA ▪ 94588
Phone: 925.621.2270 Fax: 925.251.0801
www.alliancetransinc.com

APPLICATION FOR CREDIT

NOTE: No changes or alterations may be made to this application without prior approval. Any changes or alterations must be initialed by the applicant and an authorized representative of Alliance Transportation, Inc.

Date: _____

Name of Business: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone # _____ Fax # _____

Please Check One: _____ Corp. _____ Partnership _____ Sole Proprietor _____ L.L.C.

If a Branch, Affiliate, or dba, give the name and contact information of the parent company:

Name: _____ Phone # _____

Address: _____

Officers Name/Title: _____ Phone # _____

Phone # _____

Type of Business: _____ Year Established: _____

Federal ID#: _____ Duns# _____

Accounts Payable Contact: _____ Phone # _____

E-Mail Address: _____

Purchase Orders Required?: Y _____ N _____ Proof of Delivery? Y _____ N _____

Person(s) authorized to place orders: _____

Bank Affiliation: _____ Account # _____

Address: _____ City: _____ State: _____

Contact: _____ Phone # _____

TRADE REFERENCES: (Trucking Companies Preferred)

1. Company:	_____	Contact:	_____
Phone:	_____	Fax:	_____
2. Company:	_____	Contact:	_____
Phone:	_____	Fax:	_____
3. Company:	_____	Contact:	_____
Phone:	_____	Fax:	_____
4. Company:	_____	Contact:	_____
Phone:	_____	Fax:	_____

TERMS AND CONDITIONS:

It is agreed that balance be paid in full according to approved terms of either 15 (fifteen) or 30 (thirty) days from the date of the invoice. Alliance Transportation, Inc. reserves the right at any time to revoke any credit extended to the applicant because of applicant's failure to pay for services rendered when due or for any reason deemed good and sufficient by Alliance Transportation, Inc.
·Should any check be returned for any reason, applicant agrees to pay Fifty Dollars (\$50.00) for each occurrence

·It is agreed that interest at the rate of 2 % per month (as allowed by CA state law) be applied to any past due credit balance.
·In the case of default on payment terms, applicant accepts responsibility for balance plus interest plus collections/court costs & reasonable attorney fees.
·The laws of the State of California govern the validity, interpretation, and enforcement of this agreement.

I HEREBY CERTIFY THAT I HAVE READ THIS ENTIRE AGREEMENT AND EXPRESSLY AGREE TO THE TERMS AND CONDITIONS HEREIN:

APPLICANT SIGNATURE: _____
(Must be signed by an officer or principal of the applicant company.)

TITLE: _____

DATE: _____

GUARANTY OF PAYMENT OF ACCOUNT COSTS, EXPENSES AND ATTORNEY'S FEES

1. The undersigned agrees to the terms of the above application for open credit account.
2. If the above-named applicant defaults in making payment on this account, the undersigned personally guarantees payment of, and will pay on demand, the unpaid balance due Alliance Transportation, Inc, including all costs and expenses, and reasonable attorney's fees incurred in the enforcement of this agreement.

PRINTED NAME: _____

SIGNATURE: _____

Submission of this application without signature on this guarantee may mean severely shortened terms, limited credit availability and/or denial of credit, or other measures to ensure payment, that Alliance Transportation, Inc. may determine at a future date.