



APPLICATION FOR CREDIT FOR CERTIFICATED CARRIER SERVICES
RETURN BY FAX TO LYNN PETRELLA AT 708-877-5222

Date: _____

Company Name: _____ Individual Name: _____

Street Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Fax Number: _____ Cell Phone Number: _____

Check Applicable Box and Complete the Requested Information:

Corporation Limited Liability Company Individual or Partnership

Corporation Name _____

Partnership Name _____

President: _____

Partner: _____

Vice Pres.: _____

Partner: _____

Secretary: _____

Partner: _____

Managers: _____

BANK REFERENCE:

Bank Account Number: _____

Name: _____

Person to Contact: _____

Street: _____

Phone: _____

City: _____

State: _____ Zip Code: _____

TRADE REFERENCES:

Name: _____

Person to Contact: _____

Street: _____

Phone: _____

City: _____

State: _____ Zip Code: _____

Name: _____

Person to Contact: _____

Street: _____

Phone: _____

City: _____

State: _____ Zip Code: _____

Initial Credit Balance Requested \$ _____.

Please enclose financial statement or other information that may help to analyze your account. BUYER authorized SELLER to make credit inquiries to banks and trade references.

Signed: _____ (BUYER)

Title: _____

Date: _____

**THIS APPLICATION MUST BE FILLED OUT COMPLETELY.
SALES AGREEMENT MUST BE SIGNED ON REVERSE SIDE.**



CERTIFICATED MOTOR CARRIER AGREEMENT

In consideration for Shepley Motor Express, Inc. ("SELLER") providing Certificated Motor Carrier services to the undersigned ("BUYER"), the undersigned ("BUYER") acknowledges and agrees to all of the following conditions:

- 1. Payment due net 15 days from date of invoice; and
2. Invoices not paid by due date shall bear interest at the rate of 12% per annum on the unpaid balance from the past due date of such invoice...
3. BUYER agrees to pay SELLER for all collection costs incurred by SELLER for administrative costs, attorney's fees, liens & filings cost, and other professional fees.
4. Any complaints regarding the quality of the service should be communicated to the General Manager preferably at the time of receipt or within 24 hours after receipt.
5. Please provide all drivers with the project name and location for all deliveries.

The parties have signed this agreement this ___ day of ___, 20__.

Check Applicable Box

[] Corporation [] Limited Liability Company [] Individual or [] Partnership

Corporation Name

BUYER'S Name

By: _____

By: _____

Title: _____

BUYER'S Address: _____

If signed by a CORPORATION, the undersigned, in consideration of the extension of credit to the BUYER does hereby guarantee the payment by the BUYER of all invoices and agrees to pay the same upon notice and demand from SELLER made more than thirty days after the date of any invoice.

_____, Individual

Accepted by: SHEPLEY MOTOR EXPRESS, INC., Seller

Signed: _____

Title: _____