

# ALL-WAYS TRUCKING INCORPORATED

3639 Aviation Way  
Medford, OR 97504  
Wats: (800) 888-6230 Local: (541) 779-9295 Fax: (541) 779-9210

## APPLICATION FOR CREDIT

**BY:** \_\_\_\_\_  
 Name of Business \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_  
 Fax Number \_\_\_\_\_

<i>In-house use only</i>	
Y	N
<b>PB:</b>	<input type="checkbox"/> <input type="checkbox"/>
<b>BL:</b>	<input type="checkbox"/> <input type="checkbox"/>
<b>PO:</b>	<input type="checkbox"/> <input type="checkbox"/>

The following information must be completed in full, and will be held in the strictest of confidence.

Ownership:     Corporation             Partnership             Individual

Name of Principal	Address	Phone Number
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**Bank Reference:**

Bank	Bank Address	Phone Number
Bank Officer	Account Number	

**Freight or Vendor References:**

1)	Business Name	Address	Phone Number
2)	Business Name	Address	Phone Number
3)	Business Name	Address	Phone Number
4)	Business Name	Address	Phone Number

Dun and Bradstreet Number and Rating if Applicable \_\_\_\_\_

We hereby authorize the release of credit and/or financial information from our bank and other financial institutions or firms with whom we have done business.

The person signing this document declares that he/she is authorized to sign this document on behalf of client, and, if credit is granted, agrees to the terms described herein.

**By signing this form, the undersigned certifies that all information on this form is correct and understands that payment of all freight invoices/charges are due within thirty (30) days of the date of the invoice; and agrees to timely payment in consideration of extended credit. In the event that an account must be turned over to an attorney or collection agency, the customer will be obligated to pay all fees and court costs. The customer agrees that should litigation become necessary, lawsuit jurisdiction will be Jackson County, Oregon.**

Signed: \_\_\_\_\_  
Officer, Owner, Partner

Date: \_\_\_\_\_ Title: \_\_\_\_\_