



Delivering Value Today. Driving The Standard For Tomorrow.®

Credit Application Form

BUSINESS CONTACT INFORMATION

Name/Title		Date business commenced	
Company name		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	
Phone			
E-mail			
Accounts Payable Contact			
Accounts Payable Phone		Estimated Monthly Credit	\$
Accounts Payable Email		Type of Business	
Email Invoices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Invoice Email Address	

BUSINESS CONTACT AND CREDIT INFORMATION

Company Address		Bank name:	
City		Primary business address	
State/Zip		City, State ZIP Code	
How long at current address?		Phone	
Duns Number		Contact Name	
Federal Tax I.D. Number		Contact Email	
		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

BUSINESS/TRADE REFERENCES

Company name		Account Number	
Address		Phone	
City, State ZIP Code		E-mail	
Company name		Account Number	
Address		Phone	
City, State ZIP Code		E-mail	
Company name		Account Number	
Address		Phone	
City, State ZIP Code		E-mail	

AGREEMENT

- All invoices are to be paid 15 days, 15-day grace period NTE 30 days from the date of the invoice.
- By submitting this application, you authorize Dayton Freight Lines to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Signature		Date;	
Printed Name:		Title:	