

R & M Logistics, Inc. 1513 Heritage Lane, Florence, SC 29505

Phone (843)662-9559 Fax (843)665-5755

Dispatcher _____ Load Pending Yes ___ No ___ Amt\$ _____

Credit Application Information Sheet

Customer: _____

Street Address: _____

City: _____ **State:** _____ **Zip** _____

Billing Address if different: _____

Phone# _____ **Fax#** _____ **Email** _____

Billing Instructions:

Amount of Credit requested: _____ **D&B#** _____

D&B Rating _____ **Compunet Rating** _____

Bank

Name _____ **Phone#** _____

List 4 Trucking Companies as credit references:

1- _____ **Phone#** _____

2- _____ **Phone#** _____

3- _____ **Phone#** _____

4- _____ **Phone#** _____

⇒As an officer or owner of the above listed company I certify that all information listed is correct. I agree to pay all freight invoices, after 15 days of receipt.

Company

Name: _____

Officer or

Owner: _____ **Title:** _____ **Date:** ___/___/___

For Credit Manager @ R&M Only:

Credit Approved / Disapproved Credit Limit \$ _____ **Initials** _____