



8441 SE 68<sup>th</sup> St. #227 - Mercer Island, WA 98040

7/12

# APPLICATION FOR CREDIT

<b>Company Name and Billing Address</b>				
Full Legal Company Name:				
Address:				
City:		State:		Zip code:
Business Type:			If incorporated, in what state:	
Years in Business:		Employer ID:		Dunn & Bradstreet Number:
<b>Please List Corporate Officers or Principal Owners</b>				
Name	Title	Years w/Company	Telephone and Fax	
<b>Person to Contact Regarding Invoice Payments</b>				
Name:			Title:	
Telephone:			Facsimile:	
Email address:				
Special Billing Instructions:				
<b>Please Provide Bank References</b>				
Bank Name	Address	Account #	Telephone and Fax	Contact
<b>Please Provide at Least Three Trade References</b>				
Company Name	Address	Account #	Telephone and Fax	Contact
<b>*****Please Read, Sign and Fax to 206-236-6486*****</b>				
<p>I hereby certify the information provided to be true and correct. I agree to comply with the published credit policy, terms and conditions of AVG Transportation Specialists, Inc. I understand that if the account is past due, my company will be liable for any balances owing, with interest at the rate of 1.8% per month, for services rendered by AVG, as well as for court costs and attorney's fees incurred in collecting the account. Shipper consents to jurisdiction in, and all actions relating to this agreement shall be brought in, any federal or state court located in King County, State of Washington. Shipper consents to service of process of any lawsuit by registered or certified mail, return receipt required. By providing a valid credit card number, I agree to allow AVG Transportation Specialists, Inc. to process a credit card transaction for the amounts billed by AVG that become past due (that is, not paid within 30 days of billing) or exceed the established credit limit.</p>				
Name as it appears on card: _____				
Credit Card Account Number: _____ Exp. __/__/__ AMEX Visa or MC				
Signature of Corporate Officer _____ Title _____ Date _____				