

Brown, Alcantar & Brown Inc.

Account Information Form

CREDIT APPLICATION

Company Name		Name of Applicant:		Position / Title	
Address1:		Telephone:		Fax:	
Address2:					
City		State		Zip	
Corporation		Partnership			
Proprietorship		Joint Venture			
How Long in Business?					

PRINCIPAL OWNERS – OFFICERS, KEY MANAGEMENT MEMBERS		
FULL LEGAL NAME	POSITION	HOME ADDRESS & TELEPHONE

BANK REFERENCES	
NAME	
ADDRESS, CITY, STATE, ZIP	
BANK OFFICER	
ACCOUNT NUMBER	
PHONE NUMBER	

Credit References: (Other brokers or freight lines preferred)
(If listed on the Stock Exchange – Note Exchange & Symbol)

TRADE REFERENCEES		
COMPANY NAME	ADDRESS, CITY, STATE, ZIP	TELEPHONE NUMBER

I/We understand the above information is provided for the purpose of extending credit to our company according to your terms. To the best of our knowledge and belief, the information is accurate and may be relied upon in making your credit decision. We authorize our bank and suppliers to furnish you any information necessary to complete your evaluation of our credit history.

PAYMENT is DUE UPON PRESENTATION OF INVOICE, unless otherwise stated in writing. Services not paid by the 30th day following the purchase are considered past due and subject to an interest charge of 1.5% accrued monthly. Payments made on past due amounts will be applied first to service charges and the balance applied to principal. In the event of default, I/we agree to pay, but not limited to, reasonable attorney fees, court costs, and collection agency charges, whether or not a

Please print name / position of authorized signor		Date:
AUTHORIZED SIGNATURE		

suit is filed.