



**PO Box 6875
Richmond, VA 23230**

New Account / Credit Application

Email:accounting@clearlanefreight.com Phone: (317) 759-8346

Company Information

Name: Federal Tax ID/SSN:

Address: MC#:

City: ST: Email Address:

Zip: Phone

If Branch, Home Office Name and Address: If Subsidiary, Parent Name and Address:

Type of Business:(please select one) Corporation Proprietorship Partnership LLC, LLP

Nature of Business: State/Province: (if corporation, state of incorporation)

Invoicing Information:

Email Address for Invoices:

Name: Accounts Payable Contact:

Address: Phone#:

City: State: Zip:

Billing Requirements: Net 30

Principal Owners-Stockholders-Partners-Officers of Company:

Name	Mailing Address	City	State	Title
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1)

2)

3)

