

## FREIGHT FOR LESS

FULL LEGAL NAME:

STREET ADDRESS:				How did you hear of Freight For Less?
CITY:		STATE:	ZIP:	
PHONE:		FAX:		Internet Search
CORPORATE BILLIN	IG ADDRESS: Same as Above			Company Referral
CITY:		STATE:	ZIP:	Dispatch Contact
PHONE: FA		FAX:		
DBA COMPANY NAM	ЛЕ:			Other
COMPANY IN	FORMATION	BANK INFOR	RMATION	
Corporation	Partnership Sole Proprietor	Name		
Years in Business	Date Incorporated State Incorporated	Address		
Federal ID#	D & B#	-		
		Phone	Fax	
Day of the week check ☐ Weekly ☐ Bi-Weekly M	cks are cut (circle all that apply) T W TH F	Account #		
		Y CONTACTS		
Position	Name	Phone	E-mail /	Address
Owner: Accounts Payable:				
Shipping:				
Shipping.	REFE	RENCES		
Company Name:		Contact:		
Address:		City, State, Zip:		
Phone:	Fax:	Credit Limit:		
Company Name:		Contact:		
Address:		City, State, Zip:		
Phone:	Fax:	Credit Limit:		
Company Name:		Contact:		
Address:		City, State, Zip:		
Phone:	Fax:	Credit Limit:		
I hereby represent that I an	n authorized to submit this application on behalf of the	TERMS OF CRED		

business named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize FFL, Inc. to investigate the references listed pertaining to my/our credit and financial responsibility. It is agreed and understood that all necessary collection and legal expenses and interest (at 6.5% per year or state maximum) may be charged to debtor in the event of default or failure to pay for services rendered. I/We further represent that the business applying for credit has the financial ability and willingness to pay all invoices under the above-referenced terms. We understand the liability of FFL, Inc. as a freight broker, is limited to the aid in filing a claim against the origin carrier.

1. Freight bills are due within 30 days from shipment date.

2. All freight bills that are not paid within 30 days are subject to late charge.

3. All freight bills are subject to a correction charge if the bill of lading is not filled out correctly

4. All bills of lading must read:	Prepaid and Bill to: FFL, Inc.
	5470 E. Beverly Blvd.
	Los Angeles, CA 90022-2208

My signature below is authorization for my financial institution to provide FFI, Inc. with the requested information pertaining to my business and personal accounts. I will not hold the financial institution responsible for any information released.

Print Name:	Signature:
Title:	Date: