



Website: www.fourniertrucking.com

P.O. BOX 308
CLEAR LAKE, MN 55319
PHONE: 320-743-2258 OR 877-743-2258
FAX: 320-743-2259

Credit Application

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_

Type of Business: Corporation \_\_\_\_\_ Federal Tax ID#: \_\_\_\_\_
Partnership \_\_\_\_\_ Industry: \_\_\_\_\_
Individual Ownership \_\_\_\_\_ Type of Freight: \_\_\_\_\_ Refrigerated
Year Business Started: \_\_\_\_\_ Dry
President/Partners/Owners: (Name and Title)

1 \_\_\_\_\_
2 \_\_\_\_\_

Contact Information:
Billing: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_

Deliver To/Warehouse: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_

Trade References:
Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_
Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_
Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ 2nd Phone #: \_\_\_\_\_
E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_
Website: \_\_\_\_\_

I (name) \_\_\_\_\_, owner/officer of (company) \_\_\_\_\_, do personally guarantee payment to Fournier Brokerage for services rendered. In the event of an insolvency by the company, this personal guarantee will supersede and the owner/officer will pay any outstanding debts owed by the company to Fournier Brokerage as terms of service. Everything stated in this application is correct to my knowledge. I authorize Fournier Brokerage/Fournier Trucking to check my credit references. I understand all information will be held in confidence by Fournier Brokerage/Fournier Trucking.

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_
Signature of an Owner/Officer of the Company