



CREDIT APPLICATION

Thank you for choosing ROC Transport as your transportation provider

Please complete this application in full. If you have any questions call (800) 259 - 3224

Business Information

Please Print or Type

Legal Business Name: _____

d.b.a. _____ Federal Tax I.D. Number _____

Address _____
(street) (City) (State) (Zip Code)

Phone Number: _____ FAX Number: () _____

No. of Employees _____ Est. Annual Sales \$ _____ Type of Business: _____

Year Business Established _____ Has the firm or any of its Principals ever been bankrupt? Y / N

If yes, explain: _____

Corporate Officers

Please Print or Type

President _____ Email _____ Phone _____

Vice President _____ Email _____ Phone _____

Secretary _____ Email _____ Phone _____

Treasurer _____ Email _____ Phone _____

Trade references

Please Print or Type

Company Name _____ Contact _____ Phone _____

Company Name _____ Contact _____ Phone _____

Company Name _____ Contact _____ Phone _____

Bank References

Please Print or Type

Bank Name _____ Acct Type _____ Contact _____ Phone _____

Bank Name _____ Acct Type _____ Contact _____ Phone _____

Bank Name _____ Acct Type _____ Contact _____ Phone _____

Permission

Applicant agrees to pay any collection costs incurred to collect any unpaid balance, including interest on the balance as allowed by state law and any reasonable attorney's fees incurred.

The undersigned as an inducement to grant credit warrants that the information submitted is true and correct. By signing this document you are authorizing ROC Transport to investigate the credit references listed above.

Signature _____ Title _____ Date _____ Printed Name _____