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Haul Carrier Logistics

740 W State Road 434, Longwood, FL 32750
Ph: (407) - 377-5577 | Fax: (407) - 2037017

Web: haulcarrier.com | Email: support@haulcarrier.com

Information Sheet

_____	_____
Company Name	Email address
_____	_____
Street Address (or Billing Address if different)	Phone Number
_____	_____
City, State, Zip Code	Fax Number

Business Information

Nature of Business: _____ In Business Since: _____
 Is Business Seasonal? _____. If Yes, indicate peak season: _____
 Business Organization (Please check one only): Sole Proprietor - Partnership - Corporation Limited Liability Co -

Payment Information

Payment Contact: _____ Payment Email: _____
 Payment Phone (if different than above): _____ Fax: _____
 Is Bill of Lading/POD required for freight bill payment? Yes _____ No _____
 Special Billing Instructions: _____

Banking Information

Name of Bank: _____ Contact Name: _____
 Street Address: _____ Phone/Fax: _____ / _____
 City, State, Zip: _____ Account Number: _____

Transportation References (Attach additional pages if necessary)

1. _____	_____ / _____
Name of Company	Contact Phone Fax
2. _____	_____ / _____
Name of Company	Contact Phone Fax

ESTIMATED MONTHLY VOLUME: \$ _____ ESTIMATED DATE OF FIRST LOAD: _____

Applicant herein certifies that the information contained herein is true and correct and that he/she is authorized to execute this application on behalf of the entity named above ("Applicant"). Applicant hereby authorizes Haul Carrier ("HC") or any of its agents to obtain credit information from the bank, trade, transportation and credit references listed above and credit reporting companies as Haul Carrier deems necessary to determine applicant's payment history and to report credit information to others. Applicant agrees to pay Haul Carrier within 30 days of invoice receipt.

Any such charges not paid to Haul Carrier within thirty (30) days from the date of an invoice shall accrue interest at a rate of 1.0% per month. It is further agreed that the Applicant shall pay any collection expenses, including, but not limited to, attorney fees and court costs that may become necessary to effectively collect payment from Applicant, whether any such attorney fees or expenses are incurred with, without, before or after commencement of formal proceedings or any lawsuit incurred prior to or after entry of a judgment. All transactions and dealings between Haul Carrier and Applicant shall be governed by the laws of the State of Florida, and where applicable, federal law. Applicant further waives and agrees not to assert any defense based upon jurisdiction, venue, inconvenience of forum, lack of personal jurisdiction, or similar doctrine for actions commenced by Haul Carrier in such courts. Applicant further waives any right to a jury trial. Applicant further agrees not to back solicit or tender loads directly to the carriers that Haul Carrier arranges to haul, nor allow such carriers to haul freight directly for the Applicant. Applicant agrees that any, and all claims for loss or damage to cargo or theft of cargo and any claims for delay in delivery of freight, will be directed to and asserted directly to the Carrier arranged by Haul Carrier. Haul Carrier will facilitate all claims and actions on behalf of Applicant. Haul Carrier contract Carriers will have a minimum of \$100,000 cargo insurance Haul Carrier, who is acting in all respects pertaining hereto as an interstate property broker only. Carrier is fully liable for its actions while they have care, custody and control of the Applicant's freight. The Carrier's liability for cargo is \$100,000, or other pre-arranged amount specified in writing and accepted by both parties. Delay claims, in any event, shall be limited to a maximum of an amount equal to one hundred dollars per day by which delivery was late, or, in the event premium on-time service is required, Applicant will provide written notice of Foreseeable Expenses to both Haul Carrier Logistics and the Carrier prior to dispatch of the load, that details the costs to the shipper of any late delivery in advance to the carrier.

Sign: _____ Title: _____ Date: _____

Your Name _____ Agent Name _____

What are your shipping hours? _____