



MUSTANG TRUCKING, INC.
CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Name of Business:			
Company Officers or Partners:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP Code:	
Date business commenced:		A/P Contact:	
Sole proprietorship:	Partnership:	Corporation:	Other:

BUSINESS AND CREDIT INFORMATION

Primary business address:		
City:	State:	ZIP Code:
How long at current address?		
Telephone:	Fax:	E-mail:
Bank name:		
Bank address:		Bank Rep. Phone:
City:	State:	ZIP Code:
Type of account	Account number	

BUSINESS/TRADE REFERENCES

Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Carrying charge of 1.5% per month (A.P.R. 18%) from the original invoice date on balance not paid.
3. By submitting this application, you authorize Mustang Trucking, Inc. to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Signature:	Mustang Trucking, Inc PO BOX 2640 Catoosa, OK 74015 (918) 234-4900 (918) 234-4903 fax MustangTrucking99@gmail.com
Name Printed:	
Title:	
Date:	