

Compass

Forwarding, Inc.

Head Office
159-15 Rockaway Blvd
Jamaica, NY 11434
Tel: (718) 528-3589
Fax: (718) 528-6751

APPLICATION FOR LINE OF CREDIT

BOSTON
440 McClellan Highway
East Boston, MA 02128
Telephone 617-569-8574
Fax 617-569-7532
Email
COMPASSMAS@AOL.COM

FREIGHT FORWARDERS

IATA AGENTS

AIR FRIEGHT
CONSOLIDATORS

CUSTOMS HOUSE
BROKERS

WAREHOUSEMAN
TRUCKERS

MARINE INSURANCE
AGENTS

FMC 2104

BUSINESS NAME _____

ADDRESS: _____ **CITY:** _____

STATE: _____ **ZIPCODE:** _____ **PHONE:** _____ **FAX:** _____

TYPE OF ORGANIZATION: CORPORATION: ___ PROPRIETORSHIP: ___ PARTNERSHIP: ___

TYPE OF BUSINESS: _____ **YEARS IN BUSINESS** _____

NAME OF OWNER	% OF OWNERSHIP	ADDRESS & PHONE
----------------------	-----------------------	----------------------------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

BANK INFORMATION

NAME OF BANK: _____

ADDRESS: _____

CHECKING ACCOUNT# _____

SAVINGS ACCOUNT# _____

BANKOFFICER: _____ **LOAN#** _____

PHONE: _____ **FAX:** _____

TRADE REFERENCES

PRIMARY SUPPLIERS	ADDRESS	PHONE	FAX
--------------------------	----------------	--------------	------------

1. _____	_____	_____	_____
----------	-------	-------	-------

2. _____	_____	_____	_____
----------	-------	-------	-------

3. _____	_____	_____	_____
----------	-------	-------	-------

ESTIMATED LINE OF CREDIT REQUESTED: \$ _____

DESCRIPTION OF CHARGES:

THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND CAN BE USED TO ESTABLISH CREDIT FOR THE ABOVE NAMED BUSINESS. THIS INFORMATION WILL BE KEPT CONFIDENTIAL AND IS FOR OUR USE ONLY. YOUR COOPERATION WILL ENABLE US TO EXPEDITE ORDERS, AND PROPERLY SERVICE YOUR ACCOUNT.

SIGNED: _____

TITLE: _____

Compass

Forwarding Co., Inc.

Head Office
159-15 Rockaway Blvd
Jamaica, NY 11434
Tel: (718) 528-3589
Fax: (718) 528-6751
FMC #2104

RELEASE OF BANKING INFORMATION

I, _____
(Name)

On behalf of:

(Business Entity)

Do hereby authorize: _____ Fax: _____
(Bank)

To release to Compass Forwarding Co., Inc., the following banking information as to account number:

(Account Number)

Opening Date of Account:	_____	_____
Average Balance of Account:	_____	_____
Current Balance of Account:	_____	_____
Original Balance of Account:	_____	_____
Borrowing or Non-Borrowing:	_____	_____
Status of Account:	_____	_____

Thank you for your attention to this matter.

Sincerely,

Signature

Date

Printed Name