



billing@coloniald.com

Telephone: (810) 388-5600

Fax: (810) 388-0552

Credit Terms:

Net 30 Days

Please use the following address on all payment remittances:

Colonial Diversified Inc

2555 Busha Hwy

Marysville, MI 48040

Attn: Accounts Receivable

Colonial Diversified, Inc.

Tax ID Number: 56-2390656

After completing this application. Please email or fax the completed application to: Accounting Dept. attn: Diane

Email: billing@coloniald.com

Fax: (810) 388-0552

An authorized signature is required on this Credit Application form in order to process the application.

For more company information visit our website at: www.coloniald.com

For Colonial Diversified Use:

References

Verified by: _____

Banking

Verified by: _____

Approved credit limit. _____

Account #: _____

Application Approval: _____

Credit Application

Signature Required for Application Approval (please refer to page 2)

Contact Information

Company Name: _____

Title: _____

Contact Person: _____

Telephone: _____

Fax: _____

Email: _____

Company Website: _____

Company Main Telephone Number: _____

Billing Information

Accounts Payable Contact: _____

Billing Address: _____

Email: _____

City: _____ State/Prov: _____ Zip/Postal Code: _____

Shipping Information (if different)

Shipping Address: _____

City: _____ State/Prov: _____ Zip/Postal Code: _____

Authorized Agents of Company

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Company Information

Established in _____ as a: Tax ID # (or SS#): _____

Corporation D&B #: _____

LLC Number of Employees: _____

Sole Proprietorship

Other (please specify) _____

Estimated number of loads you manage monthly that cross through the Port of Port Huron Michigan _____

Amount of Credit Requested: \$ _____



**Colonial
Diversified LLC**

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Bank References

Bank: _____ Telephone: _____
 Contact: _____ Fax: _____
 Account #: _____

Bank: _____ Telephone: _____
 Contact: _____ Fax: _____
 Account #: _____

Business References (minimum of 3 required)

Business: _____ Telephone: _____
 Contact: _____ Fax: _____
 Title: _____ Credit Line: _____

Business: _____ Telephone: _____
 Contact: _____ Fax: _____
 Title: _____ Credit Line: _____

Business: _____ Telephone: _____
 Contact: _____ Fax: _____
 Title: _____ Credit Line: _____

Credit Terms and Conditions

The undersigned applicant hereinafter agrees that any extension of credit by Colonial Diversified to applicant shall be subject to and in consideration of the following terms and conditions:

1. The undersigned is an authorized agent of the applicant and is duly empowered to enter into and make a binding agreement on its behalf.
2. Applicant authorizes its creditors, banks, and the financial institutions to release credit, banking and financial data to Colonial Diversified.
3. Credit terms are net 30 days. Accounts over 30 days are charged one and one half percent interest per month.
3. Should it be necessary to assign the account balance to a licensed collection agency or to an attorney for legal action, all subsequent collection charges and/or legal fees shall be paid by applicant.
4. Applicant understands that Colonial Diversified will make their usual credit investigation and applicant authorizes Colonial Diversified to collect information as necessary.
5. All fees are in U.S. dollars unless otherwise agreed to in writing between the applicant and the President of Colonial Diversified.
6. All F.O.B. Port Huron, MI unless otherwise agreed to in writing between the applicant and the President of Colonial Diversified LLC.
7. Applicant agrees and understands that Colonial Diversified reserves the right to modify credit level at any time based upon payment history and number of vehicles processed monthly.
8. If a sole proprietor, applicant guarantees all fees under this agreement.
9. Colonial Diversified reserves the right to place any account with an overdue balance on hold and demand payment in full prior to release of trailer and contents.

Agreed:

Name: _____ Title: _____

Signature (required): _____

Company: _____

Date: _____

Authorized Signature Required for Application Approval-if sent via email, the email cover page will be used as signature and approval.

Please Note: If applicant has bank references and business references available on a separate standard company document, please attach document.