

# Trailer Logistics Company, Inc.

1900 N La Fox  
South Elgin, IL60177  
Phone: 847-357-0014  
Fax: 847-357-0174

## Credit Application

### COMPANY / PERSONAL INFORMATION

Business Name			FID #	
Street Address		City	State	Zip
Telephone#	Email	Fax#	Yrs. In Bus.	Nature of Business
Type of company (check on ) <input type="checkbox"/> Corporation <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership				

### PERSONAL INFORMATION ON OFFICERS OR GUARANTORS

Name	Title	% Ownership	SS # DOB
Street Address	City	State/Zip	Home Phone
Name	Title	% Ownership	SS # DOB
Street Address	City	State/Zip	Home Phone

### COMPANY / BANK REFERENCES

Name of Bank/Branch		Officer Contact	Telephone #
Street Address	City	State	Account #'s

### INSURANCE INFORMATION

Name of Company	City	Telephone #	Contact Person
Street Address	State	Fax#	Policy #

### VENDOR INFORMATION

Name of Company	City/State	Telephone #	Contact Person
Name of Company	City/State	Telephone #	Contact Person
Name of Company	City/State	Telephone #	Contact Person

**To Whom It May Concern:** This will be your authority and my request for you to obtain and release any and all information concerning my company / personal credit report and standings. Federal requirement for copy of Driver License.

**Customer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_