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| Dugan Truck Line LLC. PO Box 771380  Wichita, Ks 67277  316-616-9395 - Fax 316-616-9386 Credit Application Please fill out all information and email this form to [kdugan@dugantruckline.com](mailto:kdugan@dugantruckline.com) | | |
| Business Contact Information | | |
| Company name: | | |
| Phone: | Fax: | |
| Email: | | |
| Shipping/Receiving address: | | |
| City: | State: | ZIP Code: |
| Date business commenced: | EIN/SSN#: | |
| accounts payable Information | | |
| Accounts payable address: | | |
| City: | State: | ZIP Code: |
| Telephone: | Fax: | |
| Email: | | |
| Accounts payable contact: | | |
| Bank name: | | |
| Bank address: | Phone: | |
| City: | State: | ZIP Code: |
| Business/trade references | | |
| 1. Company name: | | |
| Address: | | |
| City: | State: | ZIP Code: |
| Phone: | Fax: | |
| Email: | | |
| 1. Company name: | | |
| Address: | | |
| City: | State: | ZIP Code: |
| Phone: | Fax: | |
| Email: | | |
| 1. Company name: | | |
| Address: | | |
| City: | State: | ZIP Code: |
| Phone: | Fax: | |
| Email: | | |
| Agreement | | |
| All invoices are to be paid 30 days from the date of the invoice. Remit payments to Dugan Truck Line LLC., PO Box 771380, Wichita, Ks. 67277. By submitting this application, you authorize Dugan Truck Line LLC. to make inquiries into the banking and business/trade references that you have supplied. | | |
| Signature | | |
| Title: Date:  Date: | | |