

EMERALD TRANSPORTATION
EMERALD TOWING SERVICE
TOWING*HEAVY HAULING*STORAGE*SPILL RESPONSE
(800)239-0604

Business Credit Application

Business Name _____
Billing Address _____
City, State, Zip _____
Telephone _____
Fax No _____
FEIN No _____

Business Type: Proprietorship () Partnership () Corporation ().
Years in business _____

Company Principals: _____

Title _____
Title _____
Title _____

Principal Bank _____
Address _____
Contact _____ Phone _____
Account No _____

Do you require Purchase Orders: Yes () No () Contact _____

Credit References:

Company Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Agreement and Guaranty

The above information is given for obtaining credit and is warranted to be true. We affirm that we are financially able to meet our obligations and will remit all invoices within 10 Days of Service. All invoices past due over 30 days are subject to a late fee of 18% interest and 35% collection agency charges. I/We authorize all of the above named persons, businesses or financial institutions to release pertinent information to Emerald Transportation Corporation for the purpose of obtaining credit.

Officer/Owner Authorization _____ Title _____ Date _____

Please return by Fax to: 954-917-4737 or Email: Info@emeraldtowing.com