

100 Commerce Drive Pittsburgh, PA 15275 800-223-8973 **shiprrexp.com**

Application for Credit					
		Business Cont	act Information		
Name of Business:					
Phone:			Website:		
Physical Address:					
City: State:			Zip:		
Business Type: Corporation _	LLC	_ Sole Proprietor	ship Other		
Parent Company (if applicable):				
		Billing -AP I	nformation		
Invoice receipt preference:	EDI I	Email Porta	nl		
Email invoices to:			Comments:		
A/P Contact:			A/P E-mail:		
Bus	iness/trade	references <i>(Ple</i>	ase list or attach Refere	nces)	
NAME OF COMPANY	AME OF COMPANY City/State		Contact Name	Phone	
		D 1 4	T. 6		
		Bank Account	Information		
NAME OF BANK	ACCO	UNT NUMBER	CONTACT NAME	PHONE	
			TERRICA AREAS RAY		

PLEASE NOTE OUR TERMS ARE 30 DAYS

Acceptance of Credit terms

TERMS OF CREDIT SALE: If credit is approved, these terms herein shall apply and form an enforceable Credit Agreement. Full payment for our services is due thirty (30) days from the date of our invoice. Past Due Accounts are subject to suspension and credit hold and may be reported to third party credit bureaus. Non-payment and late payments shall, in either case, be an event of default of this Credit Agreement. Each payment remittance shall be payable to the named service provider identified on our invoice. Upon an event of default, the named applicant shall pay our costs of collection, including our reasonable legal fees, court costs, NSF charges, and/or third-party collection fees, regardless whether a lawsuit is initiated. As an express condition of extending credit terms of sale, and this Credit Agreement, the applicant shall not withhold any payment due or set-off any alleged freight loss or damage claim(s). If a collection action is required to enforce the terms of this Credit Agreement, the undersigned irrevocably submits to the jurisdiction of the state or federal courts located in Allegheny County, Pennsylvania. All motor carrier services are subject to the Bill of Lading and issued Rate Confirmation(s). By signing below, you have acknowledged that you have read the terms and conditions credit herein, covenant that you are authorized to enter into this Credit Agreement on behalf the applicant, and will be bound to the terms contained herein.

Applicant Name and Signature

Name of signatory (Print)

Position held

Signature (Authorized Signatory of the Customer)

Date:



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Payment Remittance Information:

Please ensure that your payment along with the remittance advice are sent to one of the options listed below. <u>Please NOTE</u>: If you're emailing your remittance documents - <u>remit@shiprrexp.com</u>

Check Remittance

R & R Express Logistics PO Box 72124 Cleveland, OH 44192

Wire Transfer

Account Name: R&R EXPRESS, INC or Affiliate The Huntington National Bank

Cleveland, OH ABA Wire Number: 044000024

Swift Code: HUNTUS33

Credit Card Portal

https://eax.shiprrexp.com/payments All major Credit Cards Accepted Invoice and customer number required 3% Fee will apply

<u>ACH</u>

The Huntington National Bank ABA/Routing Number: 041000153 Account Number: 01662724516

Please send ACH/EFT remittance detail to remit@shiprrexp.com