



Date of application _____

Name of firm or Individual: _____

Owner's Name: _____ Account's Payable Contact: _____

Account's Payable e-mail: _____

Street Address: _____ City, State, Zip: _____

Mailing Address: _____ City, State, Zip: _____

Phone #: () _____ Fax #: () _____

Federal I.D. or Social Security # _____ Resale # _____

L.C. # _____ Tax Exempt Yes No - Please check one

MC # _____ Attach a completed copy of exemption form if applicable

Number of Tractors/Trailers: Tractors _____ Trailers _____

Purchase Order Required: Yes No Please check one

Date established: _____ Corporation _____ Partnership _____ Ind. Proprietor _____

Anticipated monthly repairs: \$ _____ Annual sales volume \$ _____

Bank References

Bank: _____ Contact: _____ Address: _____

City, State, Zip: _____ Phone: () _____

Account # _____

Trade References

1. Name: _____ Phone# () _____

Address: _____ City, State, Zip _____

Fax # () _____

2. Name: _____ Phone# () _____

Address: _____ City, State, Zip _____

Fax # () _____

3. Name: _____ Phone# () _____

Address: _____ City, State, Zip _____

Fax # () _____

This application is made with the agreement that invoices are due in accordance with the terms of NET 30. I certify that, as a basis for the extension of credit, all of the information on this application is correct.

Authorized Signature: _____ Title: _____

Office Use Only

Credit: Approved _____ Credit Not Approved: _____ Comments:

3360 Spirit Way/P.O. Box 11906/Green Bay, WI 54307-1906/P: 920-347-1800/F:920-347-1821

455 N. Green Bay Rd #2, /Neenah, WI 54956/P: 920-725-7577/F: 920-722-0865

2151 SE Frontage Rd, Sturtevant, WI 53126/P: 262-732-4055/F: 262-732-4060

3301 E. Loop 820 S, Fort Worth TX 76119/ P: 682-301-3531 F: 682-301-3534

Please send completed applicator to one of the following:

Email: Nancyg@master-fleet.com

Fax: 920-347-1821

Mail: Master Fleet, LLC, PO Box 11906, Green Bay WI 54307-1906

Any questions please call 920-347-1818