

INTEGRATED LOGISTICS SERVICES, INC.

Sales Rep: _____ Date _____

Analyst: _____

Integrated Logistics Services, Inc.
3500 Old Airport Rd.
Wooster, OH 44691
Telephone (330) 264-7400
Facsimile (330) 264-7974
Attn: Judy Brown

Credit Application

CONSENT AGREEMENT

The undersigned hereby consent(s) to Integrated Logistics Services, Inc's use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) Integrated Logistics Services, Inc to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as [an] individual(s) hereby knowingly consent to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. @1681 et seq.

Authorized Signature	Title	Date
X		

COMPANY DATA

Legal Name:	Telephone:	
Trade Name(s):	Fax:	
Street Address:	Billing Address:	
Type of Company: <input type="checkbox"/> C Corporation <input type="checkbox"/> Sub S Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Other		
Are you current on all applicable franchise taxes? <input type="checkbox"/> Yes <input type="checkbox"/> No. If No, please explain:		
Bankruptcy <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, when filed? _____ <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Other		
Date Started:	Dun & Bradstreet No. (DUNS No.):	
Date Incorporated:	Federal Tax ID:	
State of Incorporation:	Parent Company Name:	
Accounts Payable Contact:	Telephone:	Fax:
	E-Mail:	
Purchasing Contact:	Telephone:	Fax:
	E-Mail:	

TRADE REFERENCES (Current and Past)

Contact Name:	Telephone:	Fax:
Company Name:	E-Mail:	
City / State:	Your Customer No.:	
Contact Name:	Telephone:	Fax:
Company Name:	E-Mail:	
City / State:	Your Customer No.:	
Contact Name:	Telephone:	Fax:
Company Name:	E-Mail:	
City / State:	Your Customer No.:	
Contact Name:	Telephone:	Fax:
Company Name:	E-Mail:	
City / State:	Your Customer No.:	

