



CARGO MARITIME

5777 WEST CENTURY BLVD., SUITE 1755
 LOS ANGELES, CA 90045 U.S.A.
 TEL#: (310) 670-5000
 FAX#: (310) 670-5115
 EMAIL: INFO@CARGOMARITIME.COM
 FMC NO. 16581NF
 FAA NO. WP-00-06-008

CREDIT APPLICATION

| APPLICANT INFORMATION | | |
|---|---------------------|---|
| Legal Registered Company Name: | | |
| Physical Address: | | |
| City: | State: | ZIP Code: |
| Billing Address: | | |
| City: | State: | ZIP Code: |
| Phone#: | Fax#: | |
| Include Country and City Code (If applicable) | | Include Country and City Code (If applicable) |
| DUNNS#: | Tax ID#: | |
| Date Established: | Incorporated State: | |
| PRINCIPAL OWNERS/OFFICERS/FINANCIAL DIRECTOR | | |
| Principal Owner Name: | | |
| Title: | Email: | |
| Officer of Corp. Name: | | |
| Title: | Email: | |
| Financial Director Name: | | |
| Title: | Email: | |
| Accounts Payable Name: | | |
| Title: | Email: | |
| BANK REFERENCES (PAYMENT ACCOUNT) | | |
| Bank Name: | Account#: | |
| Address: | | |
| City: | State: | ZIP Code: |
| Contact Name: | | |
| Phone#: | Fax#: | |
| Include Country and City Code (If applicable) | | Include Country and City Code (If applicable) |
| TRADE REFERENCES | | |
| Company Name: | Type of Business: | |
| Address: | | |
| City: | State: | ZIP Code: |
| Contact Name: | Phone#: | |
| Company Name: | Type of Business: | |
| Address: | | |
| City: | State: | ZIP Code: |
| Contact Name: | Phone#: | |



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TERMS AND CONDITIONS

Standard credit terms are net 10 days from invoice date and any request for alternative payment terms must be stated above, and are subject to approval only. Credit terms can be rescinded with or without notice if the account becomes delinquent. The customer further agrees to pay any legal costs incurred in the collection of any past due amounts including attorney's fees, in the event that this account is placed with an attorney for collections.

This account will be established for use by the applicant only. Authorization to other parties for account usage is expressly prohibited and applicant will be liable for all charges on the referenced account.

I certify that the above information is correct and complete to the best of my knowledge. I authorize Cargo Maritime, Inc. to obtain credit reports and/or credit information as deemed necessary in connection with the establishment of a credit account.

I understand and agree to the above terms and conditions of service governing all transactions between the parties.

Authorized Signature of Applicant:

Date:

Print Name:

Title:

Cargo Maritime, Inc. conducts all transactions and services subject to the National Customs Brokers and Forwarders Association of America, Inc.'s Terms and Conditions of Service, which are available online at www.cargomaritime.com Use of our services constitutes acceptance of our Terms and Conditions and acknowledgement that in no instance while tendering any shipment to us for any and all services, storage, and transport, will our liability exceed the amount as per our Terms and Conditions.