



CREDIT APPLICATION

***All information must be completely filled out or your application will not be processed.**

On the basis of the following date, we hereby apply for an extension of credit with Kevin R. Westmoreland Trucking Co., Inc. The information submitted is true and correct according to our best knowledge and belief. If any information changes, I will inform KWT immediately.

General Information

FIRM NAME (in full): _____

Street Address: _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ Other _____

Email _____

Are you: Corporation _____ Proprietorship _____ Sub Chapter S Corp _____

State of Incorporation _____ # Years in Business _____

If Subsidiary, Name & Address of Parent Company _____

Principal Owners or Officers

Name Title Home Address Social Security Number

Name Title Home Address Social Security Number

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Trade References (MUST include fax number or email address in order to expedite application process.)

Company: _____ Phone #: (____) _____ - _____

Address: _____ Fax #: (____) _____ - _____

Contact: _____ Email: _____

Company: _____ Phone #: (____) _____ - _____

Address: _____ Fax #: (____) _____ - _____

Contact: _____ Email: _____

Company: _____ Phone #: (____) _____ - _____

Address: _____ Fax #: (____) _____ - _____

Contact: _____ Email: _____

Bank Reference

Bank: _____ Phone #: (____) _____ - _____

Branch: _____ Fax #: (____) _____ - _____

Contact Name: _____ Phone #: (____) _____ - _____

Email Address: _____

It is agreed that services or sales of products from Kevin R. Westmoreland Trucking Co., Inc. will be based on these terms and conditions. Terms of payment are net 10 days. It is understood and agreed that past due balances are subject to interest at the rate of 1.5% per month or the maximum permitted by law. Customer is responsible for all collection, liens, court, and attorney costs. We hereby authorize you to contact the listed references and any credit reporting agency needed to form a credit decision.

Authorized Signer (must be one of the principal owners or officers as listed on this form) *Date*

*******PAYMENT IS DUE WITHIN 30 DAYS OF HAUL DATE, REGARDLESS OF WHEN YOU GET PAID*******

Please email COMPLETED application back to
accounting@westmorelandtrucking.com