



Account Application

Complete application in full and send to:
 Premier Logistics Partners, LLC
 9810A Medlock Bridge Road, Suite 100
 Johns Creek, GA 30097

Fax: 678-321-1107 Email: support@PLPlogistics.com

Company Name				Date of Application			
Type of Business				In Business Since			
Do you have a parent company?			Y	N	If yes, please provide parent company name and location		
Street Address				Suite #			City, State, Zip
Billing Address				Suite #			City, State, Zip
Phone Number				Fax Number			
Executive Contact			Phone			Email	
Billing Contact			Phone			Email	
Shipping Contact			Phone			Email	
Expected Monthly Business with PLP				\$			

Credit References – Required

Bank Name			Phone			Fax	
Street Address				Suite #			City, State, Zip
Account Numbers			Savings			Loan	
Checking			Phone			Fax	
Reference # 1			Phone			Fax	
Street Address				Suite #			City, State, Zip
Reference # 2			Phone			Fax	
Street Address				Suite #			City, State, Zip
Reference # 3			Phone			Fax	
Street Address				Suite #			City, State, Zip

In consideration for extension of credit, debtor agrees to (1) Credit Terms of NET 15 DAYS from invoice date, and (2) in the event it becomes necessary for creditor to either bring suit or employ a collection agency to aid in the recovery of any debt owed by the debtor, the creditor shall be entitled to recover, in addition to the amount of debt due, all of its costs and attorneys fees. The signature below authorizes Premier Logistics Partners, LLC to charge interest on outstanding balances OVER 15 DAYS OLD at a rate of 1% per month (12% per annum) or to the extent permitted by law.



I (“customer”) hereby authorize Premier Logistics Partners, LLC of Johns Creek, GA to secure trade references (bank or vendors) and a business credit report from the agency of choice for the purpose of obtaining an approval to open an account for logistics services.

Customer hereby acknowledges that Premier Logistics Partners, LLC of Johns Creek, GA is opening a new account for logistics services on behalf of customer. Customer understands that all charges are the customer’s responsibility. Customer understands that terms are NET 15 pending credit review, and agrees that any outstanding balance 45 days past the invoice date will subject the account to service interruption.

Signature of Officer		Date	
Print Name and Title			