

*Account Class:	Domestic Only: <input type="checkbox"/>	International Only: <input type="checkbox"/>	Both: <input type="checkbox"/>	R+L Sales Rep:
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*Customer Information

*Customer Name:	
*Physical Address:	
*City/State/Zip:	
*Phone #:	Fax #:
*Contact Name:	
Email Address:	Web Site Address:
Billing Information: Same as Physical Address: <input type="checkbox"/> Same Customer, Different Billing Address: <input type="checkbox"/>	
Freight Payment Company <i>(if applicable)</i> :	
Attention:	
*Address:	
*City/State/Zip:	
*Phone #:	AP Contact:
Fax #:	Email:
*Type of Payment Terms Requested:	Net 30 <input type="checkbox"/> FCCOD <input type="checkbox"/> Prepayment <input type="checkbox"/> Ocean 15 <input type="checkbox"/>
*Est. Monthly Revenue: \$	Requested Credit Limit: \$

Billing Requirements

POD Print (hardcopy) Required to Bill <input type="checkbox"/>	Attach w/Invoice <input type="checkbox"/>	Attach w/Statement <input type="checkbox"/>
Bill of Lading (BOL) Required to Bill <input type="checkbox"/>	Attach w/Invoice <input type="checkbox"/>	Attach w/Statement <input type="checkbox"/>

FOR EDI BILLING: Please contact your local representative.

Additional Shipping Locations

Shipper Name:	Contact Name:
Address:	City/State/Zip:
Phone #:	Fax #:
Email Address:	Web Site Address:
Shipper Name:	Contact Name:
Address:	City/State/Zip:
Phone #:	Fax #:
Email Address:	Web Site Address:
Shipper Name:	Contact Name:
Address:	City/State/Zip:
Phone #:	Fax #:
Email Address:	Web Site Address:

Other Comments/Instructions:

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Company Information		
Ownership Type:	Corporation: <input type="checkbox"/> Partnership: <input type="checkbox"/> Sole Proprietor: <input type="checkbox"/> Government: <input type="checkbox"/> Other: <input type="checkbox"/> _____	
Business Name:	Type of Business:	
Address:		
City/State/Zip:		
Phone #:	Fax #:	
D & B #:	Tax ID/EIN #:	Years in Business:

Bank Reference	
Name:	Account #:
Contact:	Phone #:
Address:	City/State/Zip:

Trade References		
Company Name 1:		Contact:
Address:		City/State/Zip:
Phone #:	Fax #:	Email Address:
Company Name 2:		Contact:
Address:		City/State/Zip:
Phone #:	Fax #:	Email Address:

Financial Terms:

1. Payment terms for Domestic services and International Air shipments are to be paid Net 30 days from date of invoice; for Ocean services, Net 15 days; for Duty/Taxes & Statutory Disbursements, payable upon receipt of R+L Global's invoice unless otherwise agreed.
2. Customer authorizes R+L Global to verify credit information as provided on this application.
3. Any past due account and/or any account that reaches or exceeds the established credit limit is subject to suspension of credit privileges.
4. Any expenses of collection and/or litigation including reasonable attorney fees will be the responsibility of the Customer.

Terms and Conditions of Service

Upon signing, the Customer agrees to the following:

1. Customer agrees to the terms and conditions outlined on the R+L Global's house waybill and financial terms. All International shipments by either Air or Ocean will be governed by the National Custom Brokers & Forwarders Association of America (NCBFA) Terms& Conditions, IATA Terms & Conditions for Air and Goods by Sea Act Terms & Conditions for Ocean, please refer to our website at www.rlglobal.com for a complete copy of all Terms & Conditions.
2. The Shipper has authorized R+L Global Logistics, or their designated representative(s), to handle shipments tendered to them for transportation. R+L Global Logistics reserves the right to refuse to transport any cargo that is deemed unsafe or unfit for transport. Shipments are subject to inspection by Forwarder or its designated agents; however, Forwarder is not obligated to perform such inspection. Shipments are subject to security controls by carriers and, where appropriate, by government agencies.
3. The Customer acknowledges that it has read and understands this Agreement and agrees to be bound by its provisions. Further, the Customer agrees that the terms and conditions of this Agreement supersedes all proposals or prior agreements oral or written and all other communications between the parties relating to the subject matter of this Agreement.

Privacy Act Notice

49 USC 114 authorizes the collection of this information. The information you provide will be used to qualify you or verify your status as a possible "known shipper." Providing this information is voluntary, however, failure to provide the information will prevent you from qualifying as a "known shipper." This information will be disclosed to TSA personnel and contractors or other agents including indirect air carriers in the maintenance and operation of the known shipper program. TSA may share the information with airport operators, aircraft operators, foreign air carriers, indirect air carriers, law enforcement agencies, and others in accordance with the Privacy Act, 5 USC Section 552a. For additional details, see the system of records notice for Transportation Security Threat Assessment System (DHS/TSA 002) published in the Federal Register.

Customer Authorized Signature

Print Name

Title

Date