

IMJ CORPORATION
P.O. BOX 763186
DALLAS, TEXAS 75376
sharifa.williams@imjcorp.com
(855)IMJ-CORP
465-2677

Carrier Profile

Physical address

Carrier Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Ext. _____

Fax: () _____

Contacts

Area	Name	Phone	Fax
Dispatch			
Operations			
After Hours			
Nextel #			
Other			

Equipment Type(s) please input the quantity of each trailer that applies

Flatbeds		Step Decks		Vans		Reefers		RGN's
45		45		45		45		
48		48		48		48		
53		53		53		53		

Maximum Payload: _____ **lbs**

Email: _____

Apportioned Lanes (Circle ALL that apply):

United States: All 48 states

Initials _____

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Carrier Profile

AL	AR	AZ	CA	CO	CT	DE	FL	GA	IA	ID	IL	IN	KS
KY	LA	MA	MD	ME	MI	MO	MN	MS	MT	NC	ND	NE	NH
NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
VA	VT	WA	WI	WV	WY								

Canada: AB BC MB ON QB SK

Initials _____

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Carrier Profile

BILLING PROCEDURES

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Ext. _____

Fax: (____) _____

Federal Tax ID No. _____

Owner(s): _____

Payment Terms

"IMJ CORPORATION" offers three different payment options.

Standard Terms – All invoices will be processed and paid within 30 days of receipt of all required original paperwork. The check will be mailed to the address above.

Advance – An Advance Payment of up to 40% of the total invoice amount will be made; the balance of the total invoice amount will be ACH Wire Transferred within 48 hours of receipt of all required original paperwork.

- **5% of the total invoice amount will be applied for Advance Payments.**

Quick Pay – The total invoice amount will be ACH Wire Transferred within 96 hours of receipt of all required original paperwork.

- **5% of the total invoice amount will be applied for all Quick Pay invoices.**

Payment Type (circle one)

Initials _____

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Carrier Profile

Standard Terms

Advance Pay

Quick Pay

Bank Name: _____

Address: _____

Name on Account: _____

Routing Number: _____ Account Number: _____

Initials _____