

CUSTOMER CREDIT APPLICATION

Name of Client that you are app	olying for credit with: O	NX Logistics LLC Client	# 3086		
COMPANY INFORMATION					
Legal Name:			Fed ID #:		
DBA:					
Address:		City:	State:	Zip Code:	
Phone:	Fax:	County/Parish:	Website:		
Mailing Address (If different from above):		City:	State:	Zip Code:	
BILLING CONTACT PERSON N	Name:		Title:		
Phone:		BILLING	G Email:		
FORM OF BUSINESS: Sole	Proprietor 🗆 Partnership	□ Limited Partnership	☐ LLC ☐ Corporation	Business Star	t Date:
STATE or JURISDICTION OF I	NCORPORATION / ORGA	ANIZATION:			
Home Office / Parent Company	:		City:		State:
Bankruptcy filings (company or	any principals)?: ☐ Yes	s □ No If yes, which	type(s) and date(s):		
Purchase Order Required?	☐ Yes ☐ No Name	e of Authorized Person to	Issue Purchase Orders:		
Are you listed with Dun & Brads	treet? Yes No	#:			
MOTOR CARRIER #:		DOT #:		NAICS #:	
PRINCIPALS & SHAREHOLDE	ERS				
NAME (full legal)	TITLE	ADDRESS	Р	HONE	EMAIL ADDRESS
CREDIT REFERENCES					
BANK NAME	ADDRESS	AC	COUNT #	BANK OFFICER	PHONE
TRADE CREDITORS					
NAME OF COMPANY	ADDRESS		EMAIL	PHONE	FAX
The Company applying for credit in this App Peoples Bank of Alabama, may from time to that ProBilling & Funding Service may refuse to Company, any client may receive a copy due on the 15th day of the calendar month a client account assigned to ProBilling & Fund	time purchase accounts receivable to purchase accounts of the Com of this application and all such par ofter the calendar month of the state	e. Company is furnishing the inforn pany from any of the clients at an ties are authorized to release cre ement date. If ProBilling & Funding	mation and agreements herein so y time without notice to Company dit concerning Company to ProB g Service, after Company's refuse	plely at the clients request to ob or any other party. All parties I billing & Funding Service. Comp al to pay, collects through an att	tain credit from clients and understand isted above, and with or without notice pany understands that all accounts are forney any indebtedness related to any
Signature / Title		Print Name		Date	_
PERSONAL GUARANTY The undersigned individually, jointly and severally and unconditionally guarantee the payment when due of all invoices/accounts purchased by ProBilling & Funding Service, a division of Peoples Bank of Alabama, from any Client with the above applicant or any other applicant with common ownership. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guaranty hereby consents to and authorizes the use of consumer credit report on the undersigned, by ProBilling & Funding Service from time to time as may be needed in the credit evaluation process.					
Signature		Print Name		Date	
Social Security #	_				

PLEASE FORWARD COMPLETED CUSTOMER APPLICATION TO: credit@probfs.com or Fax (256) 301-0238
PAYMENTS REMIT TO ADDRESS: P.O. Box 2222, Decatur, AL 35609-2222
p 844.277.6237 f 256.301.0238