

## Broker Information Form

Please complete all sections below to ensure accurate broker setup with Pettus Trucking LLC.

|                        |  |
|------------------------|--|
| Company Name:          |  |
| Owner's Name:          |  |
| Contact Phone Number:  |  |
| Contact Email:         |  |
| Company Address:       |  |
| City, State, ZIP:      |  |
| Driver's Name:         |  |
| Driver's Phone Number: |  |
| Truck Year:            |  |
| Truck Make:            |  |
| Truck Model:           |  |
| Number of Axles:       |  |

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit completed form to: [pettustrucking5@gmail.com](mailto:pettustrucking5@gmail.com)