

Southland Distribution, Inc.

148 W. 132nd Street. Unit B.

Los Angeles, CA. 90061

310-527-5222. Fax 310-324-5536

Credit Application:

Firm Name _____

Street Address _____

City _____ State _____ ZIP _____

Phone (____) _____ Number Of Years In Business _____

Billing Address _____

City _____ State _____ ZIP _____

Accounting Department Information: _____ Fax Number (____) _____

Accounts Payable Contact _____ Phone
(____) _____

Requirements For Billing: _____
Statement Only _____ House Bill Copy _____
Freight Bill Only _____ Both _____

Headquarters Address _____

City _____ State _____ ZIP _____

Nature Of Business _____ Motor Carrier Id# _____

President _____ Vice President _____

Secretary _____ Treasurer _____

Bank References:

Name _____ Branch _____ Acct# _____

Contact _____ Phone# _____

Trade References:

Name And Address _____ Acct# _____

Name And Address _____ Acct# _____

Credit Line Requested \$ _____ **Terms - 30 Days**

Attach Current Financial Statement (If Available)

The undersigned officer of the company authorizes inquiries as to credit information. I/We acknowledge that credit privileges, if granted, may be withdrawn at any time and certify the above information to be true. I/We also understand that all charges will be paid within the specified credit terms of southland Air's Cargo Invoice.

Date _____ By (Type Or Print) _____

Signature _____ Title _____

Please Print and Fax this Form, along with the Credit Application, to 310-324-5536