



ADEN LOGISTICS CORP  
PO BOX 217  
MONTGOMERY NY 12549  
877-837-5424 X 5 (CREDIT)  
billing@adenmoves.com

## CREDIT APPLICATION

### SECTION 1. Company Information

Name of Business (Legal)		Trade Name (DBA)		Industry	
Address		City	State	Zip	County
Phone	Fax	Web Site		Business Start Date	

### SECTION 2. Contact Information

Buyer's Name		Buyer's Email		Buyer's Phone	
Delivery Address		City	State	Zip	
Accounts Payable's Name		AP's Email		AP's Phone	

### SECTION 3. Business Ownership Information

Legal Form of Business:  S-Corp  C-Corp  Partnership  Proprietorship  LLC

Primary Owner's Name	Percent Owned	Phone	Fax	Email
Partner's Name	Percent Owned	Phone	Fax	Email

### SECTION 4. Credit Requested - Amount Requested: \$ \_\_\_\_\_

## Trade References

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_____	_____	_____	_____	_____	_____
#1: Company Name	Contact Name	Email		Phone	
_____	_____	_____	_____	_____	_____
Company Address	City	State	Zip	Account Start Date	Payment Method

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_____	_____	_____	_____	_____	_____
#2: Company Name	Contact Name	Email		Phone	
_____	_____	_____	_____	_____	_____
Company Address	City	State	Zip	Account Start Date	Payment Method

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_____	_____	_____	_____	_____	_____
#3: Company Name	Contact Name	Email		Phone	
_____	_____	_____	_____	_____	_____
Company Address	City	State	Zip	Account Start Date	Payment Method

## SECTION 5. Terms and Conditions

I hereby authorize **ADEN LOGISTICS CORP** to initiate a credit review and contact the trade references listed above in an effort to establish a line of credit. I agree to pay for all services within terms shown on freight bill. I authorize **ADEN LOGISTICS CORP** to initiate entries to the business line of credit for all amounts verbally or electronically agreed upon for services, including recurring services, and if necessary, initiate adjustments for any transactions credited/debited in error. This Authority will remain in effect until **ADEN LOGISTICS CORP** is notified in writing to cancel it in such time as to afford **ADEN LOGISTICS CORP** a reasonable opportunity to act on it. I hereby certify that all information provided on this application is true and correct and is made for the purpose of inducing **ADEN LOGISTICS CORP** to allow the applicant to purchase services. **ADEN LOGISTICS CORP** charges monthly interest of 1.5% on any past due balance. Accounts past 90 days are automatically considered in default and collection efforts will commence. In the event of a default by the applicant, **ADEN LOGISTICS CORP** shall be entitled to reimbursement of all necessary legal fees.

_____	_____	_____	_____
Signature	Name	Title	Date

*We look forward to doing business with you!*