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# Application for Credit

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The following information is requested for establishment of a credit account with **National Shipping of America, LLC (Carrier)**, represented by **National Shipping Agencies**. This information will be held in the strictest of confidence.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Years in Business: \_\_\_\_\_

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Name of Owner(s): \_\_\_\_\_

President/Manager: \_\_\_\_\_

Amount of Credit Requested: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Accounts Payable Email: \_\_\_\_\_

Proprietorship  Partnership  Corporation NVOCC Bond # \_\_\_\_\_

**Copy of NVOCC/OTI Bond certificate is required in order to process credit application.  
Please sign below if you are not an NVOCC.**

**Signature:** \_\_\_\_\_

D&B Number: \_\_\_\_\_ FED ID # \_\_\_\_\_

Additional Comments: \_\_\_\_\_

**Please complete references on next page.**