

CARRIER ONBOARDING

Accounting Information



Carrier Information

Carrier Legal Name

Carrier Name (DBA)

MC #

Address

City

State

Zip Code

Remittance Address

Street Address

City

State

Zip Code

Country

A/R Contact

A/R Phone Number

A/R Email

Federal Tax #

Is company minority owned?

☐

YES

☐

NO

Is company incorporated?

☐

YES

☐

NO

Use of Factoring Company?

☐

YES

☐

NO