

ACCOUNT APPLICATION

3900 Old International Airport Rd Anchorage, Alaska 99502-1097 TEL. (907) 243-3331 FAX (907) 249-5192

Date	20
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Answer all questions. Applications not filled out in full will cause processing to be delayed or the application to be rejected

COMPANY INFORMATION

Firm Name						Telephone:									
Street / Billing Address						Fax:									
City State					Zip Code			Email:							
Full name of owner or owners (or authorized officer of Corporation); list home address & zip code, and SS# only for partnerships or sole proprietors															
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Please Check One:	Corpor	ation	Partnership	Sole Pro	oprietor	LLC	Fed Ta	āx ID#:				Credit Amount Red		quested:	
Accounts Payable Contact:					Phone				Fax	Email:					
DBA (if any)						DUNS No.			Years in Busine			rs in Business			
PO# Required (Y□ N□) 24 HOUR CONTACT:					Telephone #:				Nature of Business:						
Note: All information updates, including credit limit increase requests must be submitted using NAC's specific forms and signed by an officer or executive of the applying company															
List at loast THREE T	DANE DE	EEDENCES	with whom you curren	atly baya ar	n account Not		FEREN		nuirod	from at least thre	o roforono	oe.			
List at least <u>THREE</u> TRADE REFERENCES with whom you currently have an account. N FIRM NAME ADDRESS				ii account. Not	ACCOUNT#				TELEPHONE				FAX		
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Bank Name Account Num					ount Numb	ımber			Contact Name						
Branch Address City				City				State	Zip Code				Phone		

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The undersigned is either a sole proprietor, a partner in a partnership, a company officer or executive, one of the principal stockholders of a corporation or an individual who may be executing a personal guarantee in connection with the extension of credit to Applicant company. APPLICANT'S SIGNATURE ATTESTS RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY ALL INVOICES IN ACCORDANCE WITH THE TERMS GRANTED BY NORTHERN AIR CARGO, INC. Invoices are due and payable 30 days from the date of the air waybill. Charges for shipments of fish are due at the time of shipment unless other terms are approved in writing. Outstanding balances may also be limited to a dollar amount agreed to in writing. Individual invoice disputes will only be allowable up to 45 days from time of air waybill creation. A service interest charge of the highest percentage allowed by law calculated monthly may be assessed and payable on all balances past due. All costs necessary to collect amounts past due will be paid to Northern Air Cargo, Inc., including any and all reasonable attorney fees. Legal rights and obligations hereunder shall be determined in accordance with the laws of the State of Alaska.

THE ABOVE INFORMATION AS WELL AS ANY INFORMATION PROVIDED WITH THIS APPLICATION IS FOR THE PURPOSE OF OBTAINING DEFERRED PAYMENT ACCOUNT STATUS AND IS WARRANTED TO BE TRUE. I./ WE HEREBY AUTHORIZE NORTHERN AIR CARGO, INC. TO INVESTIGATE THE REFERENCES LISTED PERTAINING TO MY / OUR CREDIT WORTHINESS AND / OR FINANCIAL RESPONSIBILITY.

SIGNATURE PRINTED NAME

PRINTED NAME

PHONE NUMBER

PHONE NUMBER

THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS; AGE (PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE ALL OR PART OF THE APPLICANT'S INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM; OR, BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINISTERS COMPLIANCE WITH THIS LAW CONCERNING THIS CREDITOR IS: FEDERAL TRADE COMMISSION, EQUAL CREDIT OPPORTUNITY, WASHINGTON, D.C. 20580

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Colin T. Dolan, Credit Specialist, 3900 Old International Airport Road, Anchorage, Alaska 99502; (907) 249-5162, cdolan@nac.aero within 60 days from the date you are notified of our decision. We will send you a written statement of the reason(s) for the denial within 30 days of receiving your request for the statement.

Mail original signed document to:
 Credit Department
 c/o Northern Air Cargo
3900 Old International Airport Road
 Anchorage, AK 99502

ACCOUNTING USE ONLY. DO NOT MARK BELOW THIS POINT

Credit report dbt	☐ Trade References	☐ Bank References	☐ State of Alaska
☐ Accepted ☐ Denied	TERMS: NET 30 NET 7 C.O.D.	Limit:	Acct. #



3900 Old International Airport Road Anchorage, AK 99502 (907)249-5155

Date:		
Date:		

Release of Information

Credit / Bank References

I,, authorized representative of the compar	ıy
listed below hereby authorize Northern Air Cargo's Accounting/Finance Department	
representatives to request credit/bank references from those listed on the Account Application	n
form submitted to Northern Air Cargo to be considered for a deferred payment account with	:
Northern Air Cargo.	
In doing so, I authorize the release of all applicable information requested by Northern Air C	argo
to determine the company in question's credit worthiness and financial responsibility.	
Signature	
Title	
Company	
direct phone number	