



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

Date _____ 20____

ACCOUNT APPLICATION

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 _____ _____						
Please Check One:	Corporation	Partnership	Sole Proprietor	LLC	Fed Tax ID # :	Credit Amount Requested:
Accounts Payable Contact:			Phone	Fax	Email:	
DBA (if any)				DUNS No.	Years 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						

REFERENCES

List at least THREE TRADE REFERENCES with whom you currently have an account. Note: written confirmation is required from at least three references.					
FIRM NAME	ADDRESS	ACCOUNT #	TELEPHONE	EMAIL CONTACT	FAX
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Bank Name		Account Number		Contact Name	
Branch Address		City	State	Zip Code	Phone



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ACCOUNT APPLICATION

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, LLC.** Normal 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 within a separate Terms form.** 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, LLC., 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 _____

TITLE _____ E-MAIL ADDRESS _____ 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, Accounts Receivable Manager, 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, LLC
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. #



NORTHERN AIR CARGO

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

Date: _____

Release of Information

Credit / Bank References

I, _____, authorized representative of the company listed below hereby authorize Northern Air Cargo's Accounting/Finance Department representatives to request credit/bank references from those listed on the Account Application 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 Cargo to determine the company in question's credit worthiness and financial responsibility.

Signature _____

Title _____

Company _____

direct phone number _____



Dear Accounts Payables Manager,

Northern Air Cargo now offers E-Mailing of our invoices to all our customers directly from our cargo system. We ask you to seriously consider this option, as it would save not only on important time when processing, but also leads to a greener environment. Please clearly print your information below:

- E-Mail address(es) for invoices _____

Our system can accommodate several addresses, if necessary.

Please supply your Accounts Payable contact information as well:

- A/P Contact Name _____
- A/P Contact Phone Number _____
- A/P Contact E-Mail Address _____

Sincerely,

Colin T. Dolan
Accounts Receivable Manager