



From: AJC Freight Solutions

Atlanta Corporate Headquarters:
1000 Abernathy Rd NE
Suite 600
Atlanta, GA 30328
1-877-331-0794

Jacksonville Logistics Service Center and Warehouse:
11084 Cabot Commerce Cir
Bldg. 4 Suite 100
Jacksonville, FL 32226
1-877-331-0794

Jacksonville Sales and Operations Center:
4651 Salisbury Rd
Suite 400
Jacksonville, FL 32256
1-904-440-2600

Puerto Rico Office and Warehouse:
Buchanan Office Center
Suite 212, Rd. 165 No. 40
Guaynabo, Puerto Rico 00968
1-787-792-0606

Who We Are:

With more than 45 successful years in business, the AJC Group is a global refrigerated food leader. In 1998, leveraging our knowledge, experience and strength in international logistics, we began offering 3rd party logistics services to our strategic customers and suppliers worldwide.

Today, AJC Freight Solutions proudly offers a wide array of logistics solutions including trucking/intermodal, warehousing, distribution, freight forwarding, and NVOCC across a variety of industries.

Services Include:

Truckload Service throughout Continental U.S., Canada, and Mexico for Dry and Refrigerated Cargo

Containerized Drayage throughout Continental U.S. for Dry and Refrigerated Cargo

Top Service Provider for Jones Act Trades (to/from Continental U.S into Puerto Rico, Alaska, and Hawaii)

International Rail, Air and FCL/LCL Ocean Freight

Warehousing/Consolidation

Featuring an AIB Warehouse Rating 990 out of 1,000 in Jacksonville, FL Facility

Document Instructions: Please have your accounting or credit department complete and return form to AJC Freight Solutions Credit Department via fax (1-404-942-1502) or email (credit@ajclogistics.com).

Invoice Payment: Once the completed Customer Profile is received, the AJC Freight Solutions Credit Department will send payment instructions via secure email.

COMPANY INFORMATION

Official Business Name: _____

Physical address: _____

Phone #: _____

Fax #: _____

E-mail: _____

Website: _____

Years in business: _____

Type of business: _____

EIN Number: _____

Industry Sector (Check One):

Logistics <input type="checkbox"/>	Food & Beverage <input type="checkbox"/>	Furniture <input type="checkbox"/>	Textiles & Apparel <input type="checkbox"/>	Retail <input type="checkbox"/>
HealthCare/ Medical <input type="checkbox"/>	Metal & Mining <input type="checkbox"/>	Office Supplies <input type="checkbox"/>	Electronics <input type="checkbox"/>	Energy <input type="checkbox"/>
Auto/ Transport <input type="checkbox"/>	Industrial Materials <input type="checkbox"/>	Specialty Manufacture Products <input type="checkbox"/>	Construction Materials <input type="checkbox"/>	Other <input type="checkbox"/>

Form of the Business (Check One):

Solo Owner Partnership S Corporation C Corporation LLC

Subsidiary Corporation: YES NO

If Subsidiary Corporation, please provide Parent Corporation Information:

Name: _____

Address: _____

If Corporation, year of Incorporation: _____ State of Incorporation: _____

Social Security Number (if Individual, Sole Proprietary or Partnership): _____

Amount of Credit Requested: \$ _____

How Did You Hear About Us? (Check One):

- Phone Call Account Executive Visit Email Referral Web
 Social Media Magazine Industry List Trade Show, Conference, etc. Other

OWNER/PARTNERS/STOCKHOLDERS/OFFICERS OF COMPANY

Please provide the names and contact information for the company owner(s).

Name:	<input type="text"/>	Name:	<input type="text"/>
Phone #:	<input type="text"/> <input type="text"/>	Phone #:	<input type="text"/> <input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
Name:	<input type="text"/>	Name:	<input type="text"/>
Phone #:	<input type="text"/> <input type="text"/>	Phone #:	<input type="text"/> <input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>

TRADE REFERENCES

Please provide **four (4)** business references (preferably product suppliers)

Name:	<input type="text"/>	Name:	<input type="text"/>
Phone #:	<input type="text"/> <input type="text"/>	Phone #:	<input type="text"/> <input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
Name:	<input type="text"/>	Name:	<input type="text"/>
Phone #:	<input type="text"/> <input type="text"/>	Phone #:	<input type="text"/> <input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>

BANK REFERENCES

Name:	<input type="text"/>	Phone #:	<input type="text"/> <input type="text"/>
Address:	<input type="text"/>	Fax #:	<input type="text"/> <input type="text"/>
E-mail:	<input type="text"/>		
Account number:	<input type="text"/>	Bank officer/contact	<input type="text"/>

BILLING INFORMATION

Accounts Payable (Required Information)

Billing Address: _____

Email Address for Invoices: _____

Name: _____ Title: _____

Phone #: _____ Fax #: _____

AJC Freight Solutions reserves the right to:

1. Withdraw credit privileges should the account not be maintained according to credit terms.
2. Request an additional payment should a credit limit be exceeded. Request a cash in advance payment to prior to any orders being accepted.
3. Refuse credit privileges if deemed necessary.

Credit terms are **Net 30 days** unless otherwise specified in writing and signed by an officer of AJC Logistics, LLC dba AJC Freight Solutions.

This agreement shall be governed under the laws of the State of Georgia. Any action brought under this Agreement or involving in any manner whatsoever the relationship AJC Freight Solutions and Applicant shall be determined under Georgia law. Applicant hereby consents to submit to jurisdiction of the state or federal courts of the State of Georgia and agrees that such Courts within Fulton County, State of Georgia, shall have original exclusive jurisdiction over all matters and all disputes between the parties hereto regardless of the origin of such disputes and agrees that personal jurisdiction shall reside with such courts for purposes of any action or proceeding on or related an agreement between AJC Freight Solutions and Applicant. Should Applicant be a corporation or other business entity, the signatories hereto, affirm, and assure that they have authority to bind such business entity.

Declaration:

- I/We hereby confirm that to the best of my/our knowledge the above statements are true.
- I/We make this application to open an account with AJC Freight Solutions and indicate my permission to obtain credit information from the sources referenced.
- I/We understand that credit terms are Net 30 Days upon date of invoice.
- I/We confirm financial responsibility and willingness to pay invoices in accordance with terms.
- I/we further agree to pay all legal and collection costs, to include court costs, attorney's fees and interest at the rate of 1-1/2% per month, incurred by AJC Freight Solutions to collect all amounts due which become in default of the terms of the credit extended.

Authorized Signature of Applicant

Name (Please print):

Title: _____

Date: _____