

**MESA LOGISTICS
CREDIT APPLICATION**

THANK YOU FOR GIVING MESA LOGISTICS THE OPPORTUNITY TO SERVE YOU. THE FOLLOWING INFORMATION IS NEEDED TO UPDATE OR COMPLETE OUR CUSTOMER FILE:

Company Name: _____

Billing Address: _____

Contact: _____

Phone: _____ Fax: _____

Bank Name: _____ Account#: _____

Address: _____

Phone: _____

Officer Contact: _____

Authorizing Signature: _____

REFERENCES

Please provide at least Three Carrier References

1. _____

2. _____

3. _____

4. _____

By: _____ Title: _____

PLEASE FAX THE COMPLETED FORM AT YOUR EARLIEST CONVENIENCE
TO: 214-890-0927