

FROZEN FOOD EXPRESS

CUSTOMER CREDIT & BILLING ACCOUNT SETUP

FFE's terms are Net 15. **Venue for any legal action is Dallas County, Texas.**
Unless otherwise expressly agreed to in writing, applicant acknowledges that shipment transactions will be subject to the Frozen Food Express rules tariff, FRZF105 found at www.ffeinc.com – General Rules Tariff.

Indicate the form of business you will tender: Less Than Truckload Storage
FFE Sales Representative: _____ Credit Limit Requesting: _____
Customer/Company Name: _____ Duns# _____
Street Address: _____ City: _____ ST: _____ Zip: _____
List an Officer or Partner: _____ Position/Title: _____
Corporate HQ Address: _____ City: _____ ST: _____ Zip: _____

Invoicing Requirements - Proof of Delivery included with invoice. Shipper number, PO#, BL#, and PU# are also printed on invoice when applicable.

AP/Invoice Contact: _____ Phone# _____
Invoice Address: _____ City: _____ ST: _____ Zip: _____
Email address for paperless invoicing: _____

LTL Detention Contact Information

Notification required: Yes No
First & Last Name: _____
Phone: _____ Email: _____

Appointment Contact Information Same as above

First & Last Name: _____
Phone: _____ Email: _____

OS&D (Over, Short, or Damage) Contact Information Same as above

First and Last Name: _____
Phone: _____ Email: _____

Completed by

First & Last Name: _____ Position/Title: _____
Phone: _____ Email: _____ Date: _____