

CARRIER PROFILE

Instructions: Please complete this form to insist us in dispatching for you. This form can be updated at any time by simply contacting your Dispatch Specialist. This information is for Office-use only and will not be released to any third party without your permission.

PART 1: CARRIER INFO	ORMATION SECTION				
COMPANY:	DBA (If Any):				
PHYSICAL ADDRESS:		CITY:	STATE:_	ZIP: _	
MAILING ADDRESS:		CITY:	STATE:_	ZIP:	
MAIN CONTACT:		E-MAIL:			
OFFICE PHONE:	FAX:		_CELL PHONE:		
EMERGENCY CONTACT:_		EMERGENCY PHONE:			
PART 2: EQUIPMENT	<u>TYPES</u>				
	cks: 53' VAN:				
PLEASE LIST THE BROK	KERS THAT YOU ARE ALRI	EADY SET UP/APP	ROVED WITH BELO	DW:	
	DISPATO	H SPECIFI	CATIONS:		
Please give us your mining give us a starting point.	mum cents per mile informa	ation. We understar	d that many factors	will change this inf	ormation, but this wil
CENTS (\$) PER MILE:	MAX PICKS/PICK UI	PS: MAX D	DELIVERIES:	DRIVER TOUCH (Y/N):
	Mountains? (Y/N)	TOLLS? (Y/N)	Weight Li	mit	
	Areas of USA you li	ke to travel (ZONES	<u>) – Please circle all t</u>	hat apply	
	Mid S	heast (NY, NJ, CT, RI lwest (MI, OH, KY, I Southeast (FL, GA, L Southwest (TX, N West (CA, AZ, OR, N	N, IL, WI, etc.) A, AL, etc.) IM, etc.)		
COMMENTS:					

Note: Max Picks denotes maximum pickups from Shippers. Max Drops denotes maximum deliveries to Receivers.