



** FOR OFFICE USE ONLY **						
Acct Type: Import Export Both	Approved: []	Declined: []	Terms given:			
Sales rep:	Comments:					
Carriers to be used:						

Customer Information						
Company Name:						
Address:						
City / State / Zip:						
Telephone:				Fax:		
Billing Address (if different from above):						
Type of Business: <input type="checkbox"/> corporation <input type="checkbox"/> partnership <input type="checkbox"/> proprietorship <input type="checkbox"/> other						
Nature of Business:				Date business started:		
Federal Tax ID#		D&B#		IATA#		

Accounts Payable Information						
Contact name:				Title:		
Telephone:				Fax:		
E-mail Address:						

Bank Reference						
Bank Name:				Bank Officer:		
Address:						
City / State / Zip:						
Telephone:				Fax:		
Account Number:				E-mail Address:		

Trade References						
1) Company Name:				Contact:		
Address:						
City / State / Zip:						
Email (required):				Fax no (required):		

2) Company Name:				Contact:		
Address:						
City / State / Zip:						
Email (required):				Fax no (required):		

3) Company Name:				Contact:		
Address:						
City / State / Zip:						
Email (required):				Fax no (required):		

TERMS & CONDITIONS

Standard credit terms are net 10 days from invoice date and any request for alternative payment terms must be stated above, and are subject to approval only. Credit terms can be rescinded with or without notice if the account becomes delinquent. The customer further agrees to pay any legal costs incurred in the collection of any past due amounts including attorney's fees, in the event that this account is placed with an attorney for collections.

This account will be established for use by the applicant only. Authorization to other parties for account usage is expressly prohibited and applicant will be liable for all charges on the referenced account.

I certify that the above information is correct and complete to the best of my knowledge. I authorize Global Shipping Services, LLC to obtain credit reports and/or credit information as deemed necessary in connection with the establishment of a credit account.

I understand and agree to the above terms & conditions.

Amount of Credit Requested: \$ _____

Credit Terms Requested: _____

Officer's Signature: _____

Title: _____

Print name: _____

Date: _____



BANK INFORMATION RELEASE LETTER

Please fill out the top portion and return to **Global Shipping Services, LLC**; we will then contact your bank to obtain your account information. Any and all information obtained will be handled in a confidential manner.

I hereby authorize _____ of _____
Bank officer's name Bank name

_____ to release information on our company's acct _____
Tel and fax no Company name as it appears on your bank statement

Account numbers _____,
The account (s) that you are authorizing GLOBAL SHIPPING SERVICES, LLC to obtain information from

Signature of authorized officer _____ Title _____

Print name _____ Date _____

***** THE BANK WILL COMPLETE THE INFORMATION BELOW THIS LINE *****

Account Number _____ Account Number _____

Type of account _____ Type of account _____

Date Opened _____ Date opened _____

Average Balance _____ Average Balance _____

Any returned checks? _____ Any returned checks? _____

Any loans? _____ Any loans? _____

If so, have they been paid according to terms? _____ If so, have they been paid according to terms? _____

Does customer currently have a line of credit? _____ Does customer currently have a line of credit? _____

If so, are funds currently available? _____ If so, are funds currently available? _____

Comments _____ Comments _____

Bank Officer Signature _____

Print name _____

Date _____

**** PLEASE RETURN TO GLOBAL SHIPPING BY FAX TO (908) 232-0054, ATTN: CREDIT DEPT ****



Federal Tax ID Number _____

U.S. Census Bureau

Power of Attorney

**POWER OF ATTORNEY
EXPORTER (U.S. PRINCIPAL PARTY IN INTEREST) / FORWARDING AGENT**

Know all men by these presents, that _____ (name of U.S. Principal Party in Interest, or USPPI) organized and doing business under the laws of the State or country of _____ and having an office and place of business at _____ (address of USPPI) hereby authorizes

_____ Global Shipping Services, LLC _____ (the forwarding agent) of _____ 21 Fadem Rd Unit 14, Springfield NJ 07081 _____ (address of forwarding agent) to act for and on its behalf as a true and lawful agent and attorney of the U.S. Principal Party in Interest for and in the name, place and stead of the U.S. Principal Party in interest, from this date, in the United States either in writing, electronically, or by other authorized means to:

Act as forwarding Agent for Export Control, Census Reporting and Customs purposes. Make, endorse or sign any Shipper's Export Declaration or other documents or to perform any act which may be required by law or regulation in connection with the exportation or transportation of any merchandise shipped or consigned by or to the U.S. Principal Party in Interest and to receive or ship any merchandise on behalf of the U.S. Principal Party in Interest.

The U.S. Principal Party in Interest hereby certifies that all statements and information contained in the documentation provided to the Forwarding Agent relating to exportation are true and correct. Furthermore, the U.S. Principal Party in Interest understands that civil and criminal penalties may be imposed for making false or fraudulent statements or for the violation of any United States laws or regulations on exportation.

This power of attorney is to remain in full force and effect until revocation in writing is duly given by the U.S. Principal Party in Interest and received by the Forwarding Agent.

IN WITNESS THEREOF, _____ (Full name of USPPI/USPPI Company) caused these presents to be sealed and signed:

Witness: _____

Signature: _____

Capacity: _____

Date: _____