

5009 Kenwood Ave
Baltimore, MD 21206

Phone 866-663-5750
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THIS MUST BE COMPLETED!

CARRIER PROFILE SHEET

COMPANY NAME: _____

Sole Proprietor: ___ Corporation: ___ Partnership: ___ LLC: ___ Other: ___

PHYSICAL ADDRESS: _____

CITY, STATE: _____ ZIP: _____

DISPATCH CONTACTS: _____

DISPATCH PHONE# _____ FAX: _____

E-Mail Address: _____

BILLING ADDRESS: _____

CITY, STATE: _____ ZIP: _____

MC# _____ in Svc Date _____ FEDERAL ID#: _____

EQUIPMENT AVAILABILITY:

VANS _____ STEP _____ FLATBED _____ RGN _____ DD _____

PLEASE LIST ALL OTHER SPECIALIZED EQUIPMENT:

PREFERRED TRAFFIC LANES: _____

PLEASE RETURN THIS FORM WITH OPERATING AUTHORITY, INSURANCE
CERTIFICATE, W-9 (FEDERAL TAX I-D) AND SIGNED CARRIER CONTRACT