

Manhattan Express Courier Service

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Long island City, NY 11101

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(718) 786 2356
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CREDIT APPLICATION

This application authorizes Manhattan Express Courier Service to bill the following company for messenger and trucking services.

Company Name _____

Billing Address _____

City _____ State _____ Zip _____

Telephone _____ Ext _____ Fax _____

Name _____ Title _____

Accounts Payable Contact _____ Telephone _____ Ext _____

E-mail Address _____

Tax ID Number _____

All Charges are due within 15 days of receipt of statement or invoice. I guarantee payment for charges of services rendered. I have read and agree to these terms by signing below.

Signature _____ Print Name _____

Title _____ Date _____