

Please note the completeness of this profile will increase our ability in matching your company with freight. Please type or print in black or blue ink.

Date Completed: _____ Melton Logistics Account Manager: _____

Carrier Name: _____

Carrier DBA: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Toll-free Phone: _____

Fax: _____ Email: _____

Address: _____

DOT: _____ MC: _____ SCAC: _____

Tax ID #: _____ Years your company has been in business? _____

Does your company own a brokerage? _____

References:

Please list 2 customers we can contact for references:

Company: _____ Contact: _____ Phone: _____

Company: _____ Contact: _____ Phone: _____

Operating Area	Contact Name	Phone w/ Extension	Fax	Email
Primary Contact				
Dispatch				
Dispatch				
After Hours				
Insurance/Risk Mgmt.				
Claims/Safety				
Contracts				
Accounts Receivable				

Do you haul hazardous materials? (Yes/No) **If yes, please include current HAZ-MAT registration.*

Do you haul nursery loads? (Yes/No) **If yes, please specify your available trucking materials (see below).*

Trucking materials:

4 foot tarps 6 foot tarps 8 foot tarps Chains Straps E-track Logistics post

Lift gate Spacesavers Other _____

Tracking Capabilities:

- Satellite Cellular phone Pager Scheduled call-ins 2-way radio
 Customs bonded? (Yes/No) Do you have internet access? (Yes/No) Do you have access to e-mail? (Yes/No)
 Security/Customs & Border Protection programs participation, if applicable:
 ACE (Automated Commercial Environment System)
 AES (Automated Export System)
 CSI (Container Security Initiative)
 C-TPAT (Customs – Trade Partnership Against Terrorism)
 FAST (Free & Secure Trade)
 PAPS (Pre-Arrival Processing System)
 PIP (Partners in Protection) [Canada Customs & Revenue Agency for Canadian Carriers]
 TWIC (Transportation Worker Identification Credential)

Operating Authority

- All 48 states
 NE all NE CT DE MA MD ME NH NJ NY PA RI VT WV
 MW all MW IL IN IA KY MI MN MO OH WI
 SE all SE AL AR FL GA LA MS NC SC TN VA
 SW all SW AZ CA CO KS NM NV OK UT TX
 NW all NW ID MT NE ND OR SD WA WY
 Canadian Provinces: AB BC MB NB NF NS ON PE PQ/QC SK YT
 Provincial authority? (copy attached)
 Mexico-US Inter-Mexican states
 Within Mexican state (specify) _____ **State authority? (copy attached) State authority? (copy attached)**
 Do your trailers go across US borders?
 Intrastate (specify states) _____ **(copy attached)**
 Over-the-Road Coverage (if applicable, check all that apply)
 Short-haul (0-500 miles) Long-haul (over 500 miles)

Carrier Capabilities

Mode of Service: TL LTL INTERMODAL SMALL PACKAGE AIR
 Area of Service: OTR REGIONAL LOCAL EXPEDITE TEAMS
 Average age of Tractors: _____ Average age of Trailers: _____

	Number	Length	Inside Width	Vented (Yes/No)
Dry Van				
Refrigerated				
Flatbed				
Single Drop/Step deck				
Double Drop				
RGN				
Tractors/Power only				
Other (specify)				