



courier service of new york city

Credit Application

75 Maiden Lane Suite 344 New York, NY 10038

Phone: (866) 477 3500 Fax: (866) 477 3272

This application authorizes Onpoint Courier Service, Inc to bill the following company for messenger and trucking services.

CompanyName _____ Billing Address _____

City _____ State _____ Zip _____

Company Address(if different from billing address) _____

City _____ State _____ Zip _____

Telephone () _____ Ext. _____ Fax () _____

Accounts Payables Contact: _____

Email Address: _____

Nature of your Business: _____

How were you referred to Onpoint Courier Service? _____

Main reception telephone () _____

Person responsible for services used: _____ Title: _____

Telephone () _____ Email: _____

Trade Reference

Co. Name: _____ Contact _____ Telephone: _____

Address: _____

Bank Reference

Name of Bank _____ Address _____

City _____ State _____ Zip _____

Account No. _____ Federal I.D.No. _____

Bank Contact _____ Telephone _____ Ext. _____

Title _____

Credit Card Information

Card Holder Name _____ Signature _____

Credit Card No. _____ Expiration Date _____

Billing Address _____ City _____ State _____ Zip _____

Telephone _____

All charges are due within 30 days of receipt if statement or invoice. My signature below authorizes Onpoint Courier, Inc to charge my creditcard for payment of past due charges. I guarantee payment for charges of services rendered including but not limited to court and attorney's fees. I have read and agree to these terms by signing below

Cardholder's Signature _____ Print Name: _____

Title: _____ Date: _____