



APPLICATION FOR CREDIT

Company Name: _____

Address: _____

City/State: _____

Phone: () _____ - _____ Fax: () _____ - _____

Name and title of Principal Officers: _____

Individual Responsible for Payment: _____

Accounts Payable Contact Info: ph xt. _____ Email: _____

Documentation needed with our invoicing: _____

Years in business _____

Type of Entity: Corporation _____ Partnership _____ LLC _____ Other(Specify) _____

ICC, MC, or OPERATING AUTHORITY # _____

Most Recent Annual Sales: _____ Year Ending: _____

Amount of Credit Requested for a 30 day Period \$ _____

IMPORTANT! Your Invoicing Requirements: _____

BANK: _____ Contact: _____ Phone: _____

Fax: _____ Account #(s) _____

CREDIT REFERENCES

Company: _____ Phone: _____ Fax: _____

Address: _____ Contact: _____

Company: _____ Phone: _____ Fax: _____

Address: _____ Contact: _____

Company: _____ Phone: _____ Fax: _____

Address: _____ Contact: _____

Company: _____ Phone: _____ Fax: _____

Address: _____ Contact: _____

(INTERDOM PARTNERS Salesman # _____)

Please feel free to attach other information as you feel appropriate



*** RELEASE OF CREDIT INFORMATION ***

To Whom It May Concern:

We are applying to **INTERDOM LLC** for a Credit Facility. This is authorization to release all pertinent credit information requested.

Thank you for your cooperation.

COMPANY:

ADDRESS:

CITY & STATE:

SIGNED: _____

TITLE: _____

DATE: _____



INTERDOM LLC
A Subsidiary Of Odyssey Logistics & Technology Corporation

CREDIT POLICY AND PROCEDURES

This form must be properly executed **without omissions** and submitted to our Chicago office. Delays can occur if there is inadequate or missing information so please fill all required forms out completely and honor any requests for additional information as quickly as possible. The following is both a description of Interdom LLC (herein referred to as 'Interdom') policies and a binding agreement. Please review it carefully prior to submittal for credit approval.

Payment terms:

Are agreed to be a strict thirty days from our invoice / billing date. The undersigned (herein referred to as 'Customer') also agrees that Interdom has the right to request and receive accelerated payments if account balances exceed credit limits, the account is in default due to delinquent payments, or a negotiable instrument (check) is tendered as payment that does not clear the bank for any reason whatsoever. Customer hereby agrees to a \$25.00 fee assessed for each returned check. At it's sole discretion Interdom shall be entitled to receive a monthly late fee of 1% on amounts that remain unpaid 30 days from each and every invoice date, assessed using the average daily balance method until said amounts are paid. Any failure by Interdom to charge Customer this fee shall in no way impair it's right to collect it in whole or in part at any time, and may not be construed as affecting any other stipulations as contained herein nor impairing Interdom's right to payment in full.

Payment Applications:

Customer agrees that Interdom, at it's sole discretion and without prior notice, may apply any and all payments to the oldest invoices first regardless of any instructions until the entire account balance is paid, and further agrees not to assert any offsets against amounts owed without written authorization from Interdom.

Credit Facility And Service Performance:

Customer understands Interdom's open account terms constitute a Credit Facility that is evaluated on an ongoing basis. Customer agrees that Interdom has the right to suspend or terminate the Credit Facility and it's services at any time without notice and agrees to hold Interdom harmless for any contingent liabilities or damages of each and every character resulting from such suspensions or terminations. Customer accepts that all shipments are subject to the handling railroad's Rules Circular including all underlying provisions for Force Majeure that shall equally apply to freight in drayage, transit, detention, or storage.

Affirmations:

The undersigned hereby affirms that they are duly authorized to bind Customer to such agreements, that it contains mutual consideration, shall be binding upon the heirs, legal representatives, successors and assigns of Customer, and cannot be terminated without the written consent of Interdom until all amounts owed are paid. Any and all disputes arising out of this agreement or in connection with services provided by Interdom will be governed by this agreement under Illinois law and are subject to the exclusive jurisdiction of the courts of the State of Illinois. In the event Customer's account is turned over to a collection agency or an attorney for litigation, the undersigned Customer agrees to pay all reasonable collection, attorney, and court costs.

(PLEASE LEGIBLY PRINT OR TYPE THE EXACT LEGAL COMPANY NAME ABOVE)

DATED: _____

a.) _____
*Signature of Owner / Officer / Partner
(REQUIRED!)

a.) _____
(PRINT NAME & TITLE)

b.) _____
Corporate Secretary / Countersignature
(REQUIRED!)

b.) _____
(PRINT NAME & TITLE)