



**MidWest Pacific Rail Net & Logistics**

10100 N Ambassador Drive, Suite 105

Kansas City, MO 64153

PH # 816-268-2310

Fax # 816-268-2319

Attn: Lenny Berz

E-mail: [lenny.berz@midwestpacifcrr.com](mailto:lenny.berz@midwestpacifcrr.com)

Full Legal Name Of Business: xxx				Date xx/xx/xx			
Address xxx			Phone xxx-xxx-xxxx				
City xxx	State xx	Zip xxxxx	Fax xxx-xxx-xxxx				
Date Established	Federal IEN xxx		Duns #				
<b>Section A:</b>			<b>Section B:</b>				
<b>Names of Owners or Officers</b>		Direct Phone Line and Ext.		E-mail address			
President xxx		xxx-xxx-xxxx		<a href="#">xxx</a>			
Vice President xxx		xxx-xxx-xxxx		<a href="#">xxx</a>			
Secretary							
<b>Accounts Payable Contact</b>			<b>** NECESSARY**</b> <b>ESTIMATED MONTHLY</b> <b>PURCHASES</b>				
Name: xxx		Phone xxx					
<b>BANK REFERENCE (Please provide copy of bank statement)</b>							
Bank Name xxx							
Bank Acct#'s xxx			Phone				
Address			Fax				
City xxx	State xx	Zip xxxxx	Person To Contact				
Type of Account(s) xxx		Loan #	<input type="checkbox"/> Secured <input type="checkbox"/> Unsecured				
Accounting Firm xxx			Phone xxx-xxx-xxxx				
<b>Business References:</b>							
Name xxx			Phone xxx-xxx-xxxx				
Address			Fax				
City xxx	State xx	Zip xxxxx	Contact Person xxx				
Name xxx			Phone xxx-xxx-xxxx				
Address			Fax				
City xxx	State xx	Zip xxxxx	Contact Person xxx				
Name xxx			Phone xxx-xxx-xxxx				
Address			Fax				
City xxx	State xx	Zip xxxxx	Contact Person xxx				
The above information is being submitted for the purpose of allowing Exide to assess and/or continue to assess credit on the undersigned account. The undersigned hereby represents and warrants that the information contained herein, or submitted in connection herewith, is true and complete as of the date hereof. We hereby authorize Exide to contact and investigate the references, including the banks, listed above and we authorize the reference to release the requested information. The undersigned hereby agrees to remit payment within the terms specified on the face of the invoice. If payment is not received when due, the undersigned also agrees to pay a monthly service charge equal to one and one half (1 1/2) percent or the maximum amount allowable under state law, of the unpaid delinquent balance until the account is paid in full. If the account is placed for collection, the undersigned agrees to pay all costs and expenses of collection, including attorney's fees and expenses.							
Name (Print)		Signature		Title			

**RETURN COMPLETED APPLICATION TO:**

**Midwest Pacific Rail Net & Logistics**

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