



Seahorse Container Lines

FMC 017130

GENERAL ACCOUNT APPLICATION				
Name of Company including DBA or Full Name of Individual (First, Middle, Last):				
Federal Tax ID / EIN / Social Security #:		Phone:		Fax:
Company Type:	Corporation	LLC	LLP	Partnership
Sole Proprietorship		Individual	State of Incorporation:	
Date of Birth (for Individuals & Sole Proprietors):				
Current Broker/Forwarder:				
Your Physical Address:				
City:		State:	Zip Code:	Country (If not US):
Billing Address (if different):				
City:		State:	Zip Code:	Country (If not US):
OPERATIONS CONTACT				
First Name:		Last Name:		Title:
Phone:		Fax:		Email:
CREDIT APPLICATION				
Name of Company including DBA or Full Name of Individual (First, Middle, Last):				
A/P Contact Name:			Year Established:	
A/P Contact Email:			Number of Employees:	
CFO / VP of Finance:			A/P Contact Tel#:	
Referred to Western Overseas Corporation by:			Email:	
CREDIT REQUIREMENTS				
What charges will Western Overseas advance on your behalf?		Freight	Other	Duty
Annual Disbursements		Duty:	Freight:	Other:
Credit Limit Requested:			D&B Number:	
If you would like to have your invoice and or statement automatically emailed to you please provide your email address above and check the applicable box's:			Invoice	
I acknowledge that unless a line of credit is established, payment to Western Overseas must be made in full via wire transfer prior to delivery/pick-up of cargo.			Statement	
The signature below confirms the applicant's agreement to and receipt of Western Overseas Corporation's Terms and Conditions.				Initials:
Corporate Officer's Signature:				Date of Request:
Name Printed:			Title:	