



CARRIER PROFILE

Instructions: Please complete this form to insist us in dispatching for you. This form can be updated at any time by simply contacting your Dispatch Specialist. This information is for Office-use only and will not be released to any third party without your permission.

PART 1: CARRIER INFORMATION SECTION

COMPANY: _____
DBA (If Any): _____
PHYSICAL ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
MAILING ADDRESS: _____ CITY: _____
STATE: _____ ZIP: _____
MAIN CONTACT: E-MAIL: _____
OFFICE PHONE: _____ FAX: _____ CELL
PHONE: _____
EMERGENCY CONTACT: _____
EMERGENCY PHONE: _____

PART 2: EQUIPMENT TYPES

Number and Type of Trucks: 53' VAN: _____ 53' REEFERS: _____ 48'/53'
FLATBED _____
OTHER TYPES: _____

PLEASE LIST THE BROKERS THAT YOU ARE ALREADY SET UP/APPROVED WITH BELOW:

DISPATCH SPECIFICATIONS:

Please give us your minimum cents per mile information. We understand that many factors will change this information, but this will give us a starting point

CENTS (\$) PER MILE: _____ MAX PICKS/PICK UPS: _____ MAX
DELIVERIES: _____ DRIVER TOUCH (Y/N): _____ Mountains? (Y/N) _____
TOLLS? (Y/N) _____
Weight Limit _____

Areas of USA you like to travel (ZONES) – Please circle all that apply

Northeast (NY, NJ, CT, RI, MA, ME, etc.)

Midwest (MI, OH, KY, IN, IL, WI, etc.)

Southeast (FL, GA, LA, AL, etc.)

Southwest (TX, NM, etc.)

West (CA, AZ, OR, NV, ID, etc.)

COMMENTS:

Note: Max Picks denotes maximum pickups from Shippers. **Max Drops** denotes maximum deliveries to Receivers