



Complete and submit via FAX to
Rene Arnal at 313.295.0871

RITE-WAY TRANSPORT COMPANY - Agent Application

Principal: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ - _____ - _____ Fax: _____ - _____ - _____

E-mail Address: _____ Website: _____

Federal Tax I.D. _____ Incorporated: **Y N** State: _____

Have you ever filed for bankruptcy? **Y N** If Yes, when / where _____

Rite-Way services you desire to represent: (Circle all that apply)

OTR Truckload Truckload Brokerage Intermodal Drayage

Anticipated number of trucks _____ Company trucks? **Y N** Owner Ops? **Y N**

List Previous Work and/or Agent Affiliations:

Company: _____ Years: _____ Reason left: _____

Company: _____ Years: _____ Reason left: _____

References:

Name: _____ Relationship _____ Phone # _____ - _____ - _____

Name: _____ Relationship _____ Phone # _____ - _____ - _____

Do you currently represent or do you plan to represent any other transportation company during your affiliation with Rite-Way Transport? **Y N** (if Yes, please list)

Company: _____ Type of business: _____

Company: _____ Type of business: _____

Following must be enclosed with this application: Completed W9 & Copy of Motor Vehicle License

I certify that the above information is correct to the best of my knowledge.

Signature _____ **Date** _____