



**CARRIER PROFILE**

Please take a few minutes to tell us about your company. This information will help us keep your trucks moving.

COMPANY NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

LOCAL PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TOLL FREE: \_\_\_\_\_ AFTER HOURS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ DISPATCHER(S): \_\_\_\_\_

FEDERAL ID: \_\_\_\_\_ MC#: \_\_\_\_\_ DOT #: \_\_\_\_\_

NUMBER OF TRUCKS: \_\_\_\_\_ VANS: \_\_\_\_\_ FLATBEDS: \_\_\_\_\_ REEFERS: \_\_\_\_\_

STEPDECKS: \_\_\_\_\_ SPECIALIZED: \_\_\_\_\_

**REMITTANCE INFORMATION FOR PAYMENT IF DIFFERENT FROM ABOVE:**

REMITTANCE NAME: \_\_\_\_\_

REMITTANCE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

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TEAM EMAIL TO ALL LOAD PLANNERS/DISPATCHERS:

[OPERATIONS@GULFCOASTLOGISTICS.COM](mailto:OPERATIONS@GULFCOASTLOGISTICS.COM)

ACCCOUNTING/BILLING EMAIL FOR INVOICES AND/OR PAYMENT INQUIRES:

[ACCOUNTING@GULFCOASTLOGISTICS.COM](mailto:ACCOUNTING@GULFCOASTLOGISTICS.COM)



## CARRIER REFERENCE SHEET

**MUST PROVIDE A MINIMUM OF 2 VERIFIABLE CUSTOMER/BROKER REFERENCES.  
(NOTE: REFERENCES MUST BE WILLING TO PROVIDE INFORMATION BELOW TO BE ACCEPTABLE.)**

**CARRIER NAME:** \_\_\_\_\_  
**PHONE:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_      **FAX:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

<u>CUSTOMER / BROKER REFERENCE</u>	<u>CUSTOMER / BROKER REFERENCE</u>
<b>COMPANY NAME:</b>	<b>COMPANY NAME:</b>
<b>ADDRESS:</b>	<b>ADDRESS:</b>
<b>CONTACT NAME:</b>	<b>CONTACT NAME:</b>
<b>PHONE:</b>	<b>PHONE:</b>
<b>FAX:</b>	<b>FAX:</b>
<b>EMAIL:</b>	<b>EMAIL:</b>
<b>THIS SECTION TO BE COMPLETED BY GULF COAST LOGISTICS</b>	<b>THIS SECTION TO BE COMPLETED BY GULF COAST LOGISTICS</b>
<b>SPOKE TO:</b>	<b>SPOKE TO:</b>
<b>TITLE:</b>	<b>TITLE:</b>
<b>SET-UP/LOADED SINCE:</b>	<b>SET-UP/LOADED SINCE:</b>
<b>COMMENTS:</b>	<b>COMMENTS:</b>
<b>IN GOOD STANDINGS TO LOAD AGAIN: Y or N</b>	<b>IN GOOD STANDINGS TO LOAD AGAIN: Y or N</b>