Carrier Profile

Carrier Name: SCAC:

FEIN Number: MC Number:

Physical Address:

City: State: Zip:

Mailing Address:

City: State: Zip:

Day Time Phone: Fax:

Day Time Contact: Email Address:

After Hours Contact: Phone:

Dispatcher Email:

FEIN Number: MC Number:

Other Locations:

City	State	Street Address	Phone	Fax

Operating Authority:

Intrastate:

Canadian Provinces:

Carrier Capabilities: *Check all that apply*

Mode of Service:			
TL	LTL	Intermodal	Small Package
Area of Service			
OTR	Regional	Local	Expedite
Type of Service			
Dry Van	Refrigerated	Flatbed	Auto-Hauler
Specialized-OSD	Commodities	Tankers	Straight Truck

Service Area: States:

or   Check if all 48

Check if you service a particular region:

Southeast: AL, GA, MS, NC, SC, TN, FL

Northeast: CT, DC, DE, ME, MD, MA, NH, NJ, NY, PA, RI, VT, VA, WV

Midwest: IA, IL, IN, KY, MI, MO, OH, WI

Plains: KS, MN, NE, ND, SD

Southwest: AR, LA, OK, TX

Mountain: AZ, CO, ID, MT, NV, NM, UT, WY

Pacific: OR, WA, CA

Equipment Type:

Tractors, Number

Conventional

Cab Over

Day Cab

Straight Trucks

Trailers

	Number	Load Limitations	Height	Width	Length
Dry Van					
Refrigerated					
Flatbed					
Specialized					
Pups					

Air Ride: Trucks (no.)   Trailers (no.)

Systems:

Tracking: (Check all that apply)

    Cellular,   Satellite,   Beeper,   Other,

Electronic Communications:

1. Do you currently perform EDI transactions?   Yes   No

If yes, please continue:

    204-Motor Carrier Shipment Information (Electronic Load Tendering)

    210-Motor Carrier Freight Details and Invoice (Billing)

    214-Motor Carrier Shipment Status Inquiry (Ship Status)

    990-Response to Load tender (Accept or Deny)

2. Do you currently use a PC to perform internet activities with a Customer?   Yes   No

3. Do you have a PC that could be used a few times per day to perform internet activities?   Yes   No

    Email address to use?

4. General Questions:

Can you provide trailer pools?

What percent of your drivers are owner-operators?

Are you Privately or Publicly Held?

Service:

	Current Year	Previous Year	Two Years Prior
Claims Ratio			
On Time Service %			