***PLEASE FILL THE BELOW FORM, SAVE IT ON YOUR COMPUTER AND UPLOAD***

|  |  |
| --- | --- |
|  | **Dispatcher:**Charm Logistics(Charms Trend Trading LLC)Phone: (786) 772-6602Email: info@charmlogistics.comAddress: 28-Orange Ave Goshen NY 10924 |

## **Equipment Information**

## (For multiple equipment types use the ***multiple truck form*** provided in next section)

## Size, Type, Quantity, Weight Limit, Truck/ Trailer # of Trucks:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Size | Type | Quantity | Weight limit | Truck/ Trailer# |
| Choose an Item | Choose an Item |  |  |  |
| Choose an Item | Choose an Item |  |  |  |
| Choose an Item | Choose an Item |  |  |  |
| Custom Size? | Specialty? Write here |  |  |  |
| Comments: |  |

**Multiple Truck Form**  [Only fill in case of multiple equipment, ***o’wise plea****s*e ***skip***]

Please list your equipment and number of tractors. It will help us find you a load faster.

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| --- | --- | --- | --- | --- | --- |
| **Vans** | **Qty.** | **VIN# / Weight Limit** | **Flatbed/ Specialized** | **Qty.** | **VIN# / Weight Limit** |
| Van 48’ |  |  | Flatbed 45’ |  |  |
| Van 53’ |  |  | Flatbed 48’ |  |  |
| Moving van |  |  | Flatbed 53’ |  |  |
| Van double |  |  | Flatbed B train |  |  |
| Van hotshot |  |  | Flatbed hotshot |  |  |
| Van insulated |  |  | Flatbed maxi |  |  |
| Van logistics |  |  | Flatbed side kits |  |  |
| Van open top |  |  | Landoll Trailer |  |  |
| Van roller bed |  |  | RGN |  |  |
| Van triple |  |  | RGN extendable |  |  |
| Van vented |  |  | Double Drop |  |  |
| Van blanket wrap |  |  | Stepdeck 48’ |  |  |
| Van intermodal |  |  | Stepdeck 53’ |  |  |
| Van lift gate |  |  | Stepdeck extendable |  |  |
| Van pallet exchange |  |  | Stepdeck w ramps |  |  |
| Van heated |  |  | Stretch trailer |  |  |
| Van high cube |  |  | **Reefers** | **Qty.** | **VIN# / Weight Limit** |
| Cargo van |  |  | Reefer 48’ |  |  |
| Sprinter |  |  | Reefer 53’ |  |  |
| **Conestoga** | **Qty.** | **VIN# / Weight Limit** | Reefer doubles |  |  |
| Curtainside |  |  | Reefer pallet exchange |  |  |
| Flatbed conestoga |  |  | **Containers** | **Qty.** | **VIN# / Weight Limit** |
| Stepdeck conestoga |  |  | Container 20’ |  |  |
| Double drop conestoga |  |  | Container 40’ |  |  |
| **Dry Bulk** | **Qty.** | **VIN# / Weight Limit** | Container 53’ |  |  |
| Hopper bottom |  |  | Container insulated |  |  |
| Pneumatic |  |  | Container refrigerated |  |  |
| Belly dump |  |  | Container on flat car |  |  |
| End dump |  |  |  |  |  |
| **Straight trucks** | **Qty.** | **VIN# / Weight Limit** |
| Straight trucks less than 20 ft |  |  |
| Straight trucks greater than 20 ft |  |  |
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|  |  |  |
| **Other equipment** | **Qty.** | **VIN# / Weight Limit** |
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## **Dispatch Information**

We understand that many factors will change the information you give under Dispatch section, but this will

give us a starting point.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Minimum Cents ($) Per Mile: |  | Max Pick/ Pick Ups: |  | Max Deliveries: |  |
| Driver Touch: | Choose an Item | Preferred Distance Runs: |  |

|  |  |  |
| --- | --- | --- |
| Zones [For Ex. NY, NJ, CT] | Preferred Routes / Lanes | Routes / Lanes to Avoid |
| Northeast |  |  |
| Midwest |  |  |
| Southeast |  |  |
| Southwest |  |  |
| Mountains? (Y/N) |  |
| Tolls? (Y/N) |  |
| Comments: |  |

|  |  |
| --- | --- |
| **Insurance Company** Name: |  |
| Contact Person: |  | Phone# |  |
| Comments: |  |
| **Brokers** you are already setup/ approved with: |  |
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| --- | --- |
| Preferred Brokers  | Brokers to Avoid  |
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| --- | --- |
| Driver’s First and Last Name  | Driver’s Phone # |
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##

## **Carrier Pay** : Payment information for mailing payments or banking info for direct deposit.

1. **Do you allow Advances? Choose the appropriate choice. (Mark X)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are brokers authorized to fuel advance drivers? | Yes | X | No |  |
| Are brokers authorized to lumper advance drivers? | Yes |  | No | X |

1. **How do you want to be paid?**

Please select from the following 3 options. Complete Corresponding section below-

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Mailed Check |  | Factoring | X | Direct deposit(U.S banks Only) |  |

**Option A - Mailed Check - Input your valid remit address info.**

|  |  |
| --- | --- |
| Name of Payee:  |  |
| Address:  |  |

**Option B - Factoring - Input you Factoring Company’s Information.**

|  |  |  |  |
| --- | --- | --- | --- |
| Factoring Company Name: |  | Phone#  |  |
| Email ID: |  | Fax # |  |
| Address: |  |
| Login information for Factoring Website (will be used by dispatchers to upload invoices only) |
| Username: |  | Password: |  |

**Option 3 - Direct Deposit/ ACH payment (U.S Banks Only).**

Be sure to attach a voided check (NOT a deposit slip) from your checking account. Direct deposit will not be setup without a copy of check (or letter from banking institution stating account is active) and Federal ID / Social Security #

|  |  |
| --- | --- |
| Your Financial Institution/ Bank Name: |  |
| City / State/ Zip :  |  | FED ID / SSN# |  |
| Name of Payee:  |  |  |  |
| Checking Account Number: |  |  |
| Bank Routing Number: |  |  |