



## CARRIER PROFILE

**Instructions:** Please complete this form giving us all the information that pertains to you and your company. The better informed we are, the better we will be able to assist you. This form should be updated at any time by notifying us. This information is for our use only and will not be released to any third party without your express written permission.

### PART 1: CARRIER GENERAL INFORMATION

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

DBA (If Any): \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

MAIN CONTACT PERSON: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMERGENCY CONTACT PERSON: \_\_\_\_\_ EMERGENCY PHONE:

\_\_\_\_\_

MC NUMBER: \_\_\_\_\_ YEARS ACTIVE: \_\_\_\_\_ DOT NUMBER: \_\_\_\_\_

SCAC: \_\_\_\_\_

FACTORING COMPANY (Y/N) \_\_\_\_\_

**PART 2: EQUIPMENT TYPES**

**Number and Type of Trailers:** 53' VAN: \_\_\_\_\_ 53' REEFERS: \_\_\_\_\_ 48'/53' FLATBED: \_\_\_\_\_  
POWER ONLY: \_\_\_\_\_

**Truck #'s:** \_\_\_\_\_ **Trailer #'s:** \_\_\_\_\_

**Trailer Accessories for your specific equipment types (Dry Van, Reefer, and Flatbed):**

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**OTHER TYPES:** \_\_\_\_\_

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

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**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 # OF PICK UPS:** \_\_\_\_\_ **MAX # OF DELIVERIES:** \_\_\_\_\_ **DRIVER TOUCH (Y/N):** \_\_\_\_\_

**Mountains? (Y/N)** \_\_\_\_\_ **TOLLS? (Y/N)** \_\_\_\_\_ **Weight Limit** \_\_\_\_\_

**HOME TIME** \_\_\_\_\_

ENDORSEMENTS (Y/N): \_\_\_\_\_ TYPE OF ENDORSEMENTS: \_\_\_\_\_

CLEARANCE TYPE: (TWIC, DBID, RAPID GATE, STA) \_\_\_\_\_

ARE YOU: OTR (2,500 to 3,000 miles per week) \_\_\_\_\_ Regional (300 to 400 miles) \_\_\_\_\_

Local (150 miles or less) \_\_\_\_\_

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

**Northeast** (CT, DE, MA, ME, NH, NJ, NY, PA, RI, VT)

**Midwest** (IA, IL, IN, KS, KY, MI, MN, MO, MT, NE, ND, OH, SD, WI)

**Southeast** (AL, FL, GA, MD, MS, NC, SC, TN, VA, WV)

**Southwest** (AR, AZ, LA, NM, OK, TX)

**West** (AK, AZ, CA, CO, ID, NM, NV, OR, UT, WA, WY)

COMMENTS:

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**NOTE:** When returning the **Dispatcher Packet**, which includes the completed **Dispatcher Agreement**, the **Carrier Profile** and the **Limited Power of Attorney**, please include **COPIES** of your **MC Authority Letter (Certificate)**, **Certificate of Insurance (C.O.I.)**, and **W9**. If you are working with a **factoring company**, please also include a copy of **factoring company's credit application** so that they can run the credit on the brokers and send a **Notice of Assignment (N.O.A.)** if the credit is favorable. Thank you.