



5901 Shallowford Rd. Suite 110, Chattanooga, Tennessee 37421
Office: 423.803.4800 Fax: 423.308.2610 dispatch@trancoglobal.com

CARRIER PROFILE

The following documentation is required to be returned for qualification as a Tranco Global, LLC. partner.

* denotes required information.

*Date Completed _____

*Carrier Name _____ *DOT# _____ *SCAC _____ *Tax ID _____

*Mailing Address _____

*Phone _____ *Fax _____ Web Site _____

TOP 5 BACKHAUL LANES

From: State	To: State

Other Needs? _____

Interested in regular or dedicated lanes? _____ Area? _____ Are you willing to drop trailers? _____

Length of hauls preferred? _____ Type of equipment used? _____

WILL YOU UTILIZE OWNER-OPERATORS OR INDEPENDENT/SUBCONTRACTOR IN PERFORMING WORK FOR TRANCO GLOBAL SERVICES? _____

Do you haul Hazmat? _____ Do you have a Safety Manager or Dept.? _____ Name _____ Phone _____

*Do you have internet access? _____ * Do you have e-mail access? _____ E-mail address _____

*Tracking Capabilities: Satellite _____ Cellular _____ Pagers _____

Please fax completed forms to 423.308.2610

***Contacts**

OPERATING AREAS	CONTACT NAME	PHONE	FAX	E-MAIL
Administrative				
Safety				
Insurance				
Claims				
Contracts				
After Hours				
Accounts Receivable				
EDI				

***Dispatch**

REGION	CONTACT NAME	PHONE	FAX	E-MAIL	HOURS

Are you a privately or publicly held company? _____

Any other information that would you think would be beneficial? _____

Signature: _____ Title: _____ Date: _____