

A large, stylized blue wave graphic with white outlines, flowing from the left side of the page towards the right, positioned above the main title.

# Customer Information Packet

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**Cargo Logistics International LLC**  
**Address:** 8761 Dorchester Rd Suite 205  
**City State Zip:** North Charleston, SC 29420  
**Email:** [freight@cargologistics.com](mailto:freight@cargologistics.com)  
**web:** [www.cargologistics.com](http://www.cargologistics.com)

**Phone:** 843.377.2556  
**Fax:** 843.377.2559  
**CARGO**  
**LOGISTICS**  
INTERNATIONAL

## Our Company

Cargo Logistics International LLC is a transportation brokerage firm headquartered in North Charleston, SC. The company was founded in 2005 by Chadwick Rundle. Our company was one of the first transportation brokers in America after industry deregulation. Our mission is to provide reliable and experienced brokerage and consultation services to motor carriers and shippers in North America. Since its inception in 1981, Cargo Logistics International LLC has assisted over 35,000 carriers and shippers with the movement of their freight across the Continental United States as well as to Canada and Mexico.

## Company Credentials:

Cargo Logistics International LLC  
MC 523851  
BOND#: 115977  
FED ID#: 27-1844261  
D.U.N.S.#: 03-005-0724  
<http://www.CargoLogistics.com>

## Additional Documentation

Please complete and submit the Application for Credit & Agreement of Terms found on the following page. You will also find IRS form W-9 for your records. Additional documentation such as Authority, Surety Bond, and a sample Insurance Certificate can be found at our website.

## Thank you!

Thank you for this opportunity to provide for your transportation and logistics needs. We look forward to a long and successful relationship.

**DEBTOR INFORMATION**

Legal Name of company liable for debit: \_\_\_\_\_

dba or other names \_\_\_\_\_ DUNS #: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal code: \_\_\_\_\_

Phone: \_\_\_\_\_ Toll-Free: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Website Address: \_\_\_\_\_

**REMITTANCE** - Please provide an email address or fax number to which freight bills should be submitted

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

*Only complete mailing address below if email or fax is not desirable for freight bill remittance*

Billing Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal code: \_\_\_\_\_

**ACCOUNTSPAYABLE CONTACT**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**BILLING REQUIREMENTS**

Proof-of-Delivery required? \_\_\_\_\_ Pallet Exchange \_\_\_\_\_ Pallet Cost: \_\_\_\_\_

What commodities do you ship? \_\_\_\_\_ Do you reimburse handling charges? \_\_\_\_\_

Maximum Value of Cargo? \_\_\_\_\_ Average Value of Cargo? \_\_\_\_\_

Special Billing or Invoice Instructions: \_\_\_\_\_

Printed: \_\_\_\_\_ Date: \_\_\_\_\_

This contract made this \_\_\_\_ day of \_\_\_\_\_, 2016, by and between \_\_\_\_\_, located at \_\_\_\_\_, a domestic corporation, hereinafter called "SHIPPER", and Cargo Logistics International LLC, located at 8761 Dorchester Rd Suite 205 North Charleston, SC 29420, a domestic corporation, hereinafter called "FREIGHT BROKER". Whereas, Freight Broker is engaged in the business of placing loads, tendered to it by shipper, for transportation with carriers by motor vehicle, regulated by the Federal Motor Carrier Safety Administration, under contract with such carriers; and Whereas, Freight Broker represents that it is duly authorized to perform such services for compensation under a license issued to it by the Federal Motor Carrier Safety Administration (FMCSA) in Docket No. MC-161546; and that it holds an effective Surety Bond or Trust Fund Agreement under 49 U.S.C. 10927(b) and 49 C.F.R. 1045; and that it shall employ only the services of motor carriers duly authorized by the Interstate Commerce Commission and insured in accordance with the laws and regulations of the appropriate federal and/or state regulatory agencies including but not limited to the Federal Motor Carrier Safety Administration and the United States Department of Transportation. Whereas, Freight Broker desires to provide its transportation services on behalf of the Shipper for the interstate, intrastate and foreign transportation of commodities as more specifically described hereinafter; and Whereas, Shipper desires to avail itself of such service. Now, therefore, in consideration of the mutual agreements herein contained, and the compensation that the Freight Broker will receive from the monies that are paid for the transportation, the parties agree as follows:

1. Shipper agrees to tender certain loads, from time to time, to Freight Broker. The charges as to each shipment shall be agreed to, either orally or in writing, by the parties, prior to the movement of the shipment. All verbal agreements will be in transposed to written format of which will be provided via email within the same business day.
2. Freight Broker agrees to make every reasonable effort to place such loads with contract carriers for the purpose of transporting the loads with reasonable dispatch under the direction of the Shipper.
3. Freight Broker agrees to provide Shipper with adequate proof of acceptance and delivery of such loads in the form of a freight bill, and Shipper understands that the Freight Broker will be compensated by the carrier for the moves on which the Shipper pays the Freight Broker the transportation charges.
4. Except as may otherwise appear herein (including appendices), the rights and obligations existing between the parties hereto shall be those defined in the Interstate Commerce Act as to the conduct of Freight Brokerage in interstate and foreign commerce.
5. The terms of this Agreement shall commence on the above stated date and shall continue in effect until terminated by either party upon not less than fifteen (15) days written notice, either hand delivered or mailed to the address shown above.
6. The parties agree that in the event Shipper determines it has a claim for cargo loss or damage against any carrier transporting a load tendered to it by Freight Broker, the Freight Broker will act as administrator for the claim and insure that all claims are filed and processed in accordance with 49 C.F.R. 1005. All matters pertaining to rates and charges should be solely between Shipper and Freight Broker.
7. Freight Broker represents that the carriers that it uses will hold effective cargo insurance for all loads placed for transportation with them, and that the benefits of such insurance shall insure to the Shipper.
8. Freight Broker agrees that it shall treat all sensitive business information as confidential and shall not release same without the written consent of the Shipper.
9. It is understood between the parties that Freight Broker shall remain an independent contractor under this contract and that its agents and/or employees are under its exclusive management and control and that Shipper neither exercises nor retains any control or supervision of or over Freight Broker, or its operations, agents or employees in any manner whatsoever.
10. It is understood between the parties that each shall conduct its operations and activities in accordance with all Federal, State and Municipal laws, regulations, rules and ordinance affecting or regulating the transportation of the commodities involved.

11. Freight Broker agrees that in each of the contracts it has with contract carriers that the following clause shall be included:  
"Carrier authorizes Freight Broker to invoice Shipper, receiver, consignor or consignee for freight charges as agent for and on behalf of Carrier. Payment of the freight charges to Freight Broker shall relieve Shipper, receiver, consignor or consignee of any liability to the Carrier for non-payment of charges."
12. Freight Broker agrees to indemnify Shipper and hold it harmless from any claims which arise from the use of carriers not meeting the above stated requirements.
13. This instrument constitutes the entire agreement of the parties with reference to the subject matter hereof, and may not be changed, waived, or modified except in writing signed by both parties. This contract shall be construed in accordance with the laws of the State of South Carolina.
14. If any dispute arises about any matter covered by the terms of this Motor Contract Carrier Agreement, the dispute must be submitted, by the party who alleges a violation filing a complaint with the Federal Motor Carrier Safety Administration. The complaint shall contain specific references to pertinent statutory provisions and regulations of the Commission, and the terms of this contract that the complainant believes have been violated.

Such a complaint shall be submitted in accordance with all the provisions of 49 C.F.R. 1111.

No court action can be taken by either party prior to the decision of the Commission, and the decision of the Commission shall be a binding, final and non-appeal able decision. If for any reason the Commission refuses to accept the complaint, or refuses to make a ruling on the subject matter of the complaint, then the parties' recourse shall be to the judicial system and both parties will submit to binding arbitration and expressly waive thier right to a jury trial. If the parties can't agree on the arbitrator then a court of competent jurisdistion shall appoint the arbitrator.

The broker after the payment by the shipper will imdemnify and hold the shipper harmless from any claim by carrier for non-payment of carrier's fees.

IN WITNESS WHEREOF, the parties have caused this Contract to be executed as of the day and year first written above.

SHIPPER: \_\_\_\_\_  
BY: \_\_\_\_\_  
TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_

FREIGHT BROKER: Cargo Logistics INTL LLC  
BY: Chad Rundle  
TITLE: Managing Director  
ADDRESS: 8761 Dorchester Rd Suite 205  
CITY, STATE, ZIP N Charleston, SC 29420  
PHONE: 843.377.2556  
FAX: 843.377.2559

# Request for Taxpayer Identification Number and Certification

Give Form to the  
 requester. Do not  
 send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Cargo Logistics International LLC</b>		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) <u>S</u> Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) <b>8761 Dorchester Dr Suite 205</b>		Requester's name and address (optional)
	6 City, state, and ZIP code <b>North Charleston, SC 29420</b>		
	7 List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number																	
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2	7		1	8	4	4	2	6	1								

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person <b>CR</b>	Date <b>January 2nd, 2015</b>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.  
 Future developments . Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9) .

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.  
Washington, DC 20590

**SERVICE DATE**  
March 21, 2016

**DECISION**

MC-523851-B  
CARGO LOGISTICS INTERNATIONAL, LLC  
NORTH CHARLESTON, SC

**REINSTATEMENT OF AUTHORITY**

On February 16, 2010, CARGO LOGISTICS INTERNATIONAL, LLC, was notified that its broker license was revoked by the Federal Motor Carrier Safety Administration.

CARGO LOGISTICS INTERNATIONAL, LLC, has now filed a written request for reinstatement of the authority and has submitted evidence of compliance with 49 U.S.C § 13906 and 49 CFR 387.

**It is ordered:**

The broker license evidenced in Docket No. MC-523851-B is reactivated. The effective date of the reinstatement of this authority is shown below.

**Decided:** March 21, 2016  
By the Federal Motor Carrier Safety Administration

A handwritten signature in black ink, reading "Jeffrey L. Secrist".

Jeffrey L. Secrist, Division Chief  
Office of Registration and Safety Information

REI

**FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION  
ACCEPTANCE REPORT**

USER ID: **LEXINSCO**  
TRANSMISSION NUMBER: **WEB82128**  
TRANSMITTED ON: **03/16/2016 16:38:09**  
  
COMPANY NAME: **LEXON INSURANCE COMPANY**  
SUMMITTED BY: **LEXON INSURANCE COMPANY (25838-00)**

Docket	Form/Type	Policy Number	Effective Date	Action
<b>MC-523851</b>	<b>BMC-84/SURETY</b>	<b>1115977</b>	<b>03/16/2016</b>	<b>ACCEPTED</b>

Values in FMCSA Licensing & Insurance Database:

Legal Name: CARGO LOGISTICS LLC  
Address: 8761 DORCHESTER RD SUITE 205  
NORTH CHARLESTON SC US 29420

91X Coverage(Type/Max/Underlying):

Total: 1



**FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION  
ACCEPTANCE REPORT**

**Total: 1**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/21/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Roanoke Insurance Group SC One Poston Road, Suite 100 Charleston, SC 29407	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(843) 723-5880</b>	FAX (A/C, No): <b>(843) 556-0975</b>
	<b>E-MAIL ADDRESS:</b>	
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A : Lloyds of London</b>		
<b>INSURER B :</b>		
<b>INSURER C :</b>		
<b>INSURER D :</b>		
<b>INSURER E :</b>		
<b>INSURER F :</b>		

**INSURED**  
**Cargo Logistics International**  
**8761 Dorchester Rd., Ste 205**  
**North Charleston, SC 29420**

**COVERAGES**

**CERTIFICATE NUMBER:**

**REVISION NUMBER:**

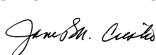
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / <input checked="" type="checkbox"/> N / A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
<b>A</b>	<b>Contingent MTC Legal</b>			<b>16TIP10157</b>	<b>03/21/2016</b>	<b>03/21/2017</b>	<b>CMTC 100,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
To cover the legal liability of the Assured for physical loss or damage to lawful goods while in the custody of a motor truck carrier, railroad, regularly scheduled airline, or other connecting carrier to whom the Assured has entrusted the shipment, in due course of transit within the forty-eight (48) contiguous United States and/or Canada.

**CERTIFICATE HOLDER**

**CANCELLATION**

<b>Cargo Logistics International</b> <b>8761 Dorchester Road Suite 205</b> <b>North Charleston, SC 29420</b>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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