

**TRANSPRO FREIGHT SYSTEMS  
CUSTOMER PROFILE**

**SALES PERSON**

COMPANY NAME
PRIMARY CONTACT
PHONE & EXT.
FAX
EMAIL

**CUSTOMS BROKER INFO.**

Inbound:
Account #:

Outbound:
Account #:

**SHIPPING**

Name:	
Phone:	
Email:	
<b>Hours of Operation</b>	
Mon. - Fri	Other Days & Times
<b>After hours contact</b>	
Name:	
Phone:	
Email:	

**RECEIVING**

Name:	
Phone:	
Email:	
<b>Hours of Operation</b>	
Mon. - Fri	Other Days & Times
<b>After hours contact</b>	
Name:	
Phone:	
Email:	

*If no after hours contact is provided, carrier is not responsible for service issues and all extra border costs accepted.*

Do you prefer to receive your invoices via email?	
Email address/s:	
Do you require any backup information with your invoice?	

Does your company participate in CTPAT?	
If no, do you have procedures in place for security of goods and people?	