



CARRIER APPLICATION PACKET

MC #848947

Carrier Applicant,

Thank you for your interest in becoming a partner carrier with H&F Logistics. We look forward to building a partnership with you. Please return the following items to expedite the setup process:

1. Copy of your insurance certificate with H&F Logistics as the certificate holder; Enclosed is a request to be faxed to insurance provider.
2. Signed Transportation Carrier-Broker agreement
3. Completed Carrier Profile Sheet
4. Copy of your MC Authority
5. Copy of your W-9
6. NACD Carrier Selection Guideline Agreement

H&F Logistics Billing Procedures

To ensure prompt payment for your services, please submit the following paperwork for each shipment your company hauls to accounting@hflog.com:

1. Original bill of lading
2. Delivery date time receipt/signature
3. Your invoice showing confirmed rate
4. Copy of the signed Load Confirmation

Quick Pay

H&F Logistics offers expedited payment options at a nominal fee for your convenience. Please follow the instructions printed on the enclosed document, complete, and return to our office if interested in utilizing this service.

H&F Logistics phone
317.813.4845
317.813.3933
www.hflog.com
info@hflog.com

Physical Address
9307 East 56th Street
Indianapolis, IN 46216

Billing Address
9307 E. 56th Street
Indianapolis, IN 46268
accounting@hflog.com

H&F LOGISTICS CARRIER PROFILE

Company Name

Telephone (Local & Toll-Free)

Correspondence Address

City/State/Zip

Check Remittance Address

City/State/Zip

Email Address

Emergency Contact Phone Number

Contact Name (Dispatch)

Contact Name (Billing)

MC #

FED ID#

SCAC Code

Does your company report your receivables history to D&B or another credit agency? If so, please state which one.

Is your company: Woman-owned Minority-owned Veteran-owned (if yes, please attach certificate)

LLC Companies: Do you require a 1099-Misc at the end of the year? Yes No

Company is (check one): Corporation Partnership Sole Proprietor

Communication w/ trucks via: Prone Cellular Satellite None

Type of Equipment: Van Reefer Flatbed Specialized 48' 53' Both

Number of Trucks: _____

Number of Trailers: _____

States you have equipment in:

Lanes you need help with (example: CA to TX):

Do you offer service to (check one or both): Canada Mexico

Remarks or services your company offers:

Air Ride

Carry Pallets

Drop Trailers

Cartage

Teams

Warehousing

Hazardous Materials

LTL Services

Insurance Request

To Whom It May Concern:

Please fax us a certificate of insurance for
with the following as the certificate holder:

H&F Logistics
9307 E. 56th St.
Indianapolis, IN 46216

This may be faxed to: 317.813.3933

If you have any questions, please contact us at 317.813.4845.

Thank you.

References

** Please list a minimum of 3

Company Name: _____

Contact Phone: _____

Contact Name: _____

Company Name: _____

Contact Phone: _____

Contact Name: _____

Company Name: _____

Contact Phone: _____

Contact Name: _____

Company Name: _____

Contact Phone: _____

Contact Name: _____



Carrier Selection Checklist & Guidelines

Carrier Point of Contact:

Name: _____ Title: _____

Company: _____

Address: _____

Phone: _____ e-mail: _____

Has the Carrier had a major incident since the last audit (major spill, fire, fatality, etc.)?

Yes No

If "Yes", describe incident: _____

Is the Carrier a Chemical Handler Affiliate (CHA) member of the NACD?

Yes No

If yes, did the Carrier provide a valid NACD Responsible Distribution® verification certificate?

Yes No

If the previous two questions are answered "Yes", this audit is considered passed and completed; however, if there are extenuating circumstances that would require a full audit, please continue.

Is the Carrier certified to RCMS (Responsible Care®)?

Yes No

If yes, did the Carrier provide proof of valid certification to RCMS?

Yes No

If the previous two questions are answered "Yes", this audit is considered passed and completed; however, if there are extenuating circumstances that would require a full audit, please continue.

Is the Carrier certified to any other standards that add value to a possible business relationship?

ISO 9001:2008 ISO 14001 CTPAT Other _____

Payment Options

We offer a couple different payment options, ACH Payment or eChecks. Please select which option you would prefer below and provide the needed information for a prompt payment. If you are using a factoring company, please provide a current NOA.

ACH Payment:

Bank Name: _____

Routing Number: _____

Account Number: _____

Email for Remittance: _____

- eCheck Payment:** Electronic check that is sent via email, you print it off and endorse like a regular check.

Email address to submit eCheck and Remittance: _____

NACD Responsible Distribution® Codes

Evaluate whether the Carrier has effective and applicable activity for these codes:

Code I - Senior Management Commitment & Risk Management

Key points:

- Identification and evaluation of EHS&S Risk
- Policy, process and procedure changes communicated
- Ongoing safety communications with appropriate staff
- Required level of insurance in place and on file
- Review of loss prevention and employee accident history
- Review of near miss program
- Review of DOT recordable accident
- Review of CSA management program
- Review of spills, fires, etc.
- Evaluation of relevant contractors

Code II - Compliance Review & Training

Key points:

- Process for monitoring EHS&S regulations
- HazMat registration and permits
- Employee training & compliance
- Driver fit for duty (safety, CDL, physical and drug / alcohol testing)

Code V - Job Procedures & Training

Key points:

- Identification of skills and knowledge for drivers
- Review driver training (policies, hazmat, personal protective equipment, emergency response, vehicle maintenance, defensive driving, etc.)
- Percentage or number of drivers that have TWIC cards? _____% or _____#
- Procedure for assigning correct equipment
- Procedure for selecting tankers (type, construction, etc.)
- Procedure for preventive maintenance
- Procedure for loading, delivery and unloading products

Code VI - Waste Management & Resource Conservation

Key points:

- Waste disposal, waste reduction and pollution prevention
- Resource conservation

Code VII - Emergency Response & Public Preparedness

Key points:

- Recognition and prevention of incidents
- Notification, reporting, and response plans
- Preplanning and coordination
- Review training program
- Investigation and corrective action
- Annual review, testing, and assessment
- Carrier's emergency response capabilities
- Contractors information (hazards, emergency, evacuation)
- Participation – LEPC & response organizations

Code VIII - Community Outreach

Key points:

- Interactions with organizations, associations, government, etc.
- Employee updates on community outreach
- Public policy and regulation advocacy

Code IX - Product Stewardship

Key points:

- Customer qualification
- Hazard review with suppliers / customers

Code X - Internal Audits

Key points:

- Audits

Code XI - Corrective & Preventive Action

Key points:

- Procedure and review
- Share key findings among stakeholders (including distributors)

Code XII - Document & Records Control

Key points:

- Documented system including policies and procedures
- Master list or equivalent

Code XIII - Security

Key points:

- DOT security plan in place
- Ability to track drivers (GPS, cell phones, etc.)
- Leadership commitment
- Analysis of threats, vulnerabilities, and consequences
- Implementation of security measures
- Information and cyber-security (other IT capabilities?)
- Training, drills, and guidance
- Communications, dialogue, and information exchange
- Response to security threats and incidents
- Internal audits
- Third-party verification
- Management of change
- Continuous improvement

Other Comments:

CORPORATE REPRESENTATIVE:

Do you know of any extenuating circumstances that would disqualify this Carrier from being approved for our company?

Yes No

If yes, please detail:

Printed Name: _____ Title: _____

Signature: _____ Date: _____

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Supersedes: 6/10/11

