

APPLICATION



PHONE: 781-665-9647

FAX: 781-665-9111

DATE ___/___/___

Please check which applies:

Corporaton Individual Trade Association Co-operative Other

COMPANY NAME: _____

MAILING ADDRESS:

Street _____ P.O. Box _____

City _____ State _____ Zip _____

SHIPPING ADDRESS:

Street _____ P.O. Box _____

City _____ State _____ Zip _____

BUSINESS PHONE: _____ FAX #: _____

E-Mail Address: _____ Web Site: _____

CONTACT PERSON : _____

Application Fee: \$50.00

COMMENTS: (DBA's or Locations with same billing address) _____

Referred By: _____

I authorize Diamond Management Group, Inc. to negotiate freight rates & discount on our behalf.

Signature: _____ Title _____ Date _____

Send To : DIAMOND MANAGEMENT GROUP, INC.
 P.O.BOX 958
 MELROSE, MA 02176-0006

E-mail: diamondmanagement@comcast.net
Web Site: www.dmglogistics.com

Fax To: 781-665-9111
 Attention: Paul Catalogna