



5110 Merchandise Dr
Fort Wayne, Indiana 46825

Attention: New Carrier

To complete the setup process please send us copies of the following:

ACH Payment Form

Quick Pay Form

Truck Information

Certificate of Liability Insurance & Certificate of Cargo Insurance

Copy of Authority

W-9

Thank You



As of 2014 we, have streamlined our payment process we have switched to ACH payments for all of our carriers. We value and appreciate your business and would like to express that appreciation by paying you in a more efficient and timely manner. By changing to ACH we can expedite payment directly to you by eliminating physical checks through the mail. *You will still receive a physical check for the first payment, however all payments after that will be direct deposit.*

ACH TRANSFER FORM
Request for Banking Information

Please Complete This Form and Email to freightpay@buchananhauling.com

Supplier Code.: _____
(BHRI Internal Use Only)

Do you have multiple Pay Sites: _____
If yes, information required for each

ACH Information	
Federal ID Number	
Supplier Name	
Street Address	
City, State/Province, Postal Code	
Country	
Supplier Contact Name and Phone #	
Remittance Detail E-mail Address	
Beneficiary Bank Name	
Bank Routing Number(9 digits)	
Bank Account Number	

Completed by: _____ Title: _____

Date: _____

Buchanan Contact: Kimberley Brown
Email address: freightpay@buchananhauling.com

ACH/WIRE TRANSFER FORM (Rev: 01-2014)

**PLEASE READ and KEEP FOR YOUR RECORDS
ACH RECEIPIENTS ONLY**

Supplier agrees to receive payments for goods and/or services from Buchanan Hauling & Rigging, Inc. via Automated Clearing House (ACH). This authority is to remain in effect until Buchanan Hauling & Rigging, Inc. has received written notification of termination in such time of no less than 30 days from Supplier, and in such manner as to afford Buchanan Hauling & Rigging, Inc. a reasonable opportunity to act on it.

IN NO EVENT SHALL BUCHANAN HAULING & RIGGING, INC. BE LIABLE FOR ANY SPECIAL, INCIDENTAL, EXEMPLARY OR CONSEQUENTIAL DAMAGES AS A RESULT OF THE DELAY, OMISSION, OR ERROR OF AN ELECTRONIC CREDIT ENTRY, EVEN IF BUCHANAN HAULING & RIGGING, INC. HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. In the event of duplicate payment, overpayment, fraudulent payment, or any payment made in error, Supplier agrees to return any such payment within 15 days to Buchanan Hauling & Rigging, Inc. upon discovery of such error by Supplier.



Quick Pay Program

Toll Free: 888-544-4285
Phone 260-471-1877; Fax 260-399-4494
[Email: freightpay@buchananhauling.com](mailto:freightpay@buchananhauling.com)

GET PAID QUICKER

We offer two quick pay options. Please initial the option of your choice.

Option #1 ___ Get paid in 48 hours from the receipt of your invoice, and proof of delivery for only 3%.

Option #2 ___ Get paid in 5 days from the receipt of your invoice, and proof of delivery for only 2%.

Take advantage of one of our Quick Pay Programs.

- Sign and print your name at the bottom of this page.
- Select Option 1 or Option 2 from above.
- Print 48 Hours Quick Pay or 7 day Quick Pay on the top of your invoice.
- **Return this page, invoice and BOL by email to: freightpay@buchananhauling.com or fax to 260-399-4494.**

COMPANY NAME

YOUR SIGNATURE & TITLE

PRINTED NAME

DATE

Additional required information:

MC # _____

Tax ID # _____

Check here to cancel
Quick Pay Program



Request for Detailed Truck Information

Please only Fill Out if You Are Interested in Receiving Available Load Notices

1. With which of our brokers will you be working with at Buchanan Logistics?

2. How many trucks do you have? _____

3. What kind of trailers? (Example: 5 Flatbeds-2Vans-1RGN)

4. Do you have any equipment (straps, chains etc.)? Please include specialty equipment as well.

5. Any route you regularly travel? _____

6. Any restrictions? (Truck, travel, cargo or

otherwise?)_____

7. What is the name and email of our point of contact (The person(s) that should receive the lane information)? _____