



Valued Customer,

Thank you for taking the time to fill out these necessary documents so that we can begin a great working relationship together.

Everyone at JDM Logistix Inc knows how important it is that we meet and exceed your expectations and make seamlessly moving your goods as quick and easy as possible. We will consistently focus on providing the highest level of service and expertise in supplying your company with detailed communication and nothing but on-time performance.

If you have any questions about the enclosed documents, or would like to offer your suggestions for how we can serve you better, please feel free to contact me personally.

I look forward to working together. Alex Kragovic

JDM Logistix, Inc.

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Phone: 708-467-9100

Fax: 708-688-1116

~H



COMPANY INFORMATION

Business Started in 2016

Incorporated in 2016

Mailing & Remit to Address:

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Physical Address:

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Phone: 708-467-9100

Credit: Fax 708-688-1116

Email: credit@jdmlogistix.com

Principals:

Alex Kragovic CEO - alex@jdmlogistix.com

Anna Aleksic-VP- anna@jdmlogistix.com

	Logistics
Federal ID #	81-1570804
SCAC Code	JDMG
ICC Contract Carrier Authority	
ICC Broker Authority	MC-958152
Terms of Payments	7 Day Terms

To make payment easier and more convenient for our customers, we encourage payment via ACH and wire transfers. If you would like to take advantage of either of these convenient payment methods, please contact Anna Aleksic at banking@jdmlogistix.com for complete instructions.



APPLICATION FOR CREDIT

We request your cooperation in completing and returning this form to us as soon as possible so that we can establish a line of credit for your company. Also, please forward a copy of your most recent financial statements to assist us in this process. All information will be held in strict confidence.

Legal Name _____ Telephone # _____

Trade Name (dba) _____ Fax # _____

Billing Address _____

Shipping Address _____

Nature of Business _____

Branch () or subsidiary () of: _____ DUNS _____

Type of organization: Corporate () Partnership () Other () _____

Federal Tax # _____ (for Corporation) Year Established _____

Accounts Payable Contact _____ Telephone # _____

Fax # _____ Email# _____

Bank Reference

Name _____ Checking Account # _____

City/State _____ Telephone # _____ Email _____

Trade References (Transportation Related)

CompanyName 1. _____ 2. _____ 3. _____

Contact Name _____

Telephone # _____

Email _____

The undersigned warrants this information to be true and authorises the references listed above to release credit information to JDM LOGISTIX. Credit terms are understood to be Net 7 days from invoice date. **Applicant's signature is required to process credit application.**

Signature Print Name Title Date Salesperson:

E-mail completed form to credit@jdmlogistix.com or fax to 708-688-1116, Attn: Credit



JDM LOGISTIX INC.

Telephone 708-467-9100 Fax 708-688-1116 Email Credit@jdmlogistix.com

CUSTOMER PROFILE

Legal Name: _____ Billing Address: _____

Trade Name: _____ City: _____

Physical Address: _____ State: _____ Zip: _____

City, State, Zip: _____ What other documents do you require with your invoice?

Year Established: _____ POD () Rate Confirmation () Receipts ()

DUNS #: _____ Other _____

Payables Contact: _____ What information is required on you invoice?

Telephone: _____

Fax: _____ What is required for accessorial charges?

Email: _____

Type of Organization: _____ How would you like to receive your invoice? (email preferred)

Corporate () Partnership () Email: _____

Other () _____ Other _ If you have special requirements or

Payment Terms: _____ websites to upload invoices, please attach instructions

If you offer ACH/EFT, please attach form.

Please attach your FSC Table. Please complete the attached credit application or attach your credit reference sheet and signed credit application.

Company Business Type: _____ Main Contact: _____

Shipper () Consignee () Broker () Direct Line: _____

Product Description: _____ Cell: _____

Operations Manager: _____ Fax: _____

Main Telephone: _____

Rates: Negotiated () Contracted ()

Preferred Method of Tendering Load Confirmations: Telephone () Fax () Email () EDI ()

EDI? YES () NO ()

If yes, Transaction Required?

Load Tenders 204 () Load Tender Response 990 () Shipment Status 214 () Invoicing 210 ()

Functional Acknowledgement 997 () Other () _____

Average Value of Load? _____

Amount of Cargo Insurance required (over \$100,000) _____

Amount of Liability Insurance required (over \$500,000) _____

Typical Lead Time? _____

Average Weight of Load? _____

Type of Equipment and Length Required? _____

Mileage System to Be Used and Version _____

Does your Business Have Seasonality to it? YES () NO () If Yes, When? _____

Primary Shipping Areas From/To: Midwest () West Coast () Southeast () East Coast ()

Average Number of Shipments per Week? _____

Average Stop-Offs, if Any? _____

Is There a Lumper Service Available? YES () NO ()

Driver Assist Loading Product? YES () NO ()

Driver Assist Unloading Product? YES () NO ()

Pre Authorization? YES () NO ()

Shipping and Receiving Hours? _____

Pallet Exchange? YES () NO ()

Average Number of Pallets per Load? _____



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

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

SERVICE DATE
April 14, 2016

LICENSE
MC-958152-B
U.S. DOT No. 2860202
JDM LOGISTIX INC
BURR RIDGE, IL

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a **broker, arranging for transportation of freight (except household goods)** by motor vehicle.

This authority will be effective as long as the broker maintains insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

A handwritten signature in black ink that reads "Jeffrey L. Secrist".

Jeffrey L. Secrist, Chief
Information Technology Operations Division

BPO



April 04, 2016

ALEKSANDAR KRAGOVIC
JDM LOGISTIX INC
16W455 S FRONTAGE RD
BURR RIDGE, IL 60527

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) ASSIGNMENT

The Standard Carrier Alpha Code of **JDMG** has been assigned to:

JDM LOGISTIX INC
16W455 S FRONTAGE RD
BURR RIDGE, IL 60527
MC-958152
US DOT- 958152

This Alpha Code will apply only to the company name shown above through June 30, 2017. **Approximately two months prior to expiration of this SCAC, NMFTA will provide an invoice for renewal which must be promptly returned together with payment to ensure its continued validity.** Should the company name or address change, please notify the National Motor Freight Association, Inc. at the address below. *If you participate in the Bureau of Customs & Border Protection ACE, AMS, CAFES, FAST or PAPS programs, it is your responsibility to ensure that a copy of this letter is forwarded (email preferred) to the following address:*

CBP SCAC Processing
Bureau of Customs and Border Protection
8444 Terminal Road, Beauregard (A-105.5)
Lorton, VA 22079
AMS.SCAC@DHS.GOV

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, tariffs, etc.

NOTICE: Assignment of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810

