

CHIEF LOGISTICS

236 North Broad Street
Post Office Box 10
Seagrove, NC 27341

NC (336) 873-1100
Fax (336) 873-9219

Billing Address: P.O. Box 10
Seagrove, NC 27341

Federal ID: 56-2044274
MC#: 325335

President/Owner Kennan L. Hill ext. 230
klhill@chiefexpress.com

Logistics Coordinator April Cheek ext. 261
acheek@chiefexpress.com

AP/AR Kathryn Comer ext. 249
kcomer@chiefexpress.com

CREDIT REFERENCE

C&J Tire Express 910-641-1602
Chadbourn, NC

Southeastern Freight Lines 336-373-2093
Columbia, SC

Wicker Services 336-227-1436
Burlington, NC

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CHECKLIST FOR CARRIER'S PACKET

The following items must be returned in order for the Carrier Packet to be completed and to ensure a timely payment.

- Carrier Profile
- Carrier Contract – Be sure to initial page 1 and sign page 2
- Carrier's Authority
- Carrier's W-9 Form
- Carrier Certificate of Insurance
- ACH Payment Authorization Form

The rate confirmation will not be sent until all of these items have been received.

Please fax or email your completed packet to April Cheek at 336-873-9219 / acheek@chiefexpress.com.

Thank you,

Kennan Hill
President
Chief Logistics, LLC

CARRIER PROFILE

(Complete all fields, use N/A where not applicable)

SCAC CODE: _____ MC # _____ USDOT # _____ Federal ID # _____

Company Name _____

DBA _____

Physical Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Web Address _____

Mailing Address _____

City _____ State _____ Zip _____

Dispatch Contact(s) _____ Email _____

Operations Manager _____ Email _____

Claims Contact _____ Email _____

Accounts Receivable _____ Email _____

Would you like to be added to our daily email list of available loads? YES or NO

Insurance Company _____ Agent Name _____

Phone _____ Fax _____

(Documentation Required) **Must have a list of Cargo exclusions

Do you have EDI capability? YES or NO

Do you have HAZMAT Certification (HM232)? YES or NO

Do you run teams? YES or NO

Do you serve Canada? YES or NO Mexico? YES or NO

of Tractors _____ Satelite equipped? YES or NO If NO, method of communication _____

of Trailers _____

List # of trailers by type:

V53 ___ V48 ___ R53 ___ FB ___ SD ___ DD/RGN ___ Air Ride ___ E-Trac ___ Stretch ___ Plate ___

Specific Lanes (Origin State - Destination State)

_____-_____
_____-_____
_____-_____
_____-_____
_____-_____

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TRANSPORTATION CONTRACT

This Master Transportation Contract is effective as of _____ (effective date) by and between Chief Logistics, LLC, a licensed transportation Broker who controls the transportation of its customers' freight (hereinafter called the 'Broker') and _____, located in _____, a licensed motor carrier who provides transportation and related services under contract (hereinafter called the 'Carrier'), in consideration of the mutual promises and covenants set forth herein, the parties hereto agree as follows:

1. PERFORMANCE OF SERVICES. Carrier agrees to meet Brokers distinct transit and pricing requirements agreed to by the parties from time to time after the Effective date, as confirmed by the Brokers Insurance of a Rate Confirmation. Carrier further agrees to comply with all Brokers reasonable shipping instructions. Carrier is an independent contractor of Broker.
2. TERM. The term of this contract shall commence on _____, 20__ and shall continue in effect until the Contract is terminated by either the Broker or Carrier upon thirty (30) days written notice to the other party.
3. COMPENSATION. Carrier agrees to invoice broker within 7 days. Broker shall pay the Carrier Net 30 days from the receipt of the Carrier's invoice, Shipper's Bill of Lading, signed Delivery Receipt and other documents required by the Broker or Shipper. Carrier agrees that broker is the sole party responsible for payment of Carrier's charges. Carrier shall not seek payment from shippers, consignees or any other parties.
4. INSURANCE. Carrier agrees to maintain and keep in full force and effect at its own expense a minimum of \$100,000 per vehicle Cargo Liability Insurance covering all goods moved by the Carrier under the terms of this agreement. Carrier will also maintain a minimum of \$1,000,000 per occurrence Automobile Liability Insurance. Carrier shall furnish to Chief Logistics, LLC as a Certificate Holder on said policy.
5. CARRIER. Agrees that it will not 'Back Solicit' traffic from any shipper, consignor, consignee or customer of Broker where (1) the availability of such traffic became known to Carrier as a result of the Broker efforts or (2) the traffic was first tendered to the Carrier by the Broker. Carrier agrees to pay Broker Twenty-five percent (25%) of billed revenue on each load of such 'Back Solicitation' during this contract and for a period of Thirty-six (36) months after this contract has been terminated.
6. CARRIER will NOT re-broker, co-broker, subcontract, assign, interline or transfer the transportation of shipments hereunder to any other persons or entity conducting business under a different operating authority without prior written consent of broker. In the event that carrier breaches this provision, carrier shall remain directly liable to broker as if carrier transported such freight under its own authority in accordance with this provision and shall further hold harmless and indemnify broker from any and all loss, liability, damage, claim, fine, cost or expense, including reasonable attorney fees, arising out of or in any way related to the use of any subcontractor in violation of this provision, regardless of whether arising from the conduct or omissions of carrier, the subcontractor or any other third party.

Initials

CHIEF LOGISTICS

236 North Broad Street
Post Office Box 10
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NC (336) 873-1100
Fax (336) 873-9219

TRANSPORTATION CONTRACT

7. CARRIERS & BROKERS. Carriers and Brokers rights and obligations under this Contract for Contract Carriage, except as otherwise provided in this contract, shall be governed by the rules and regulations pertaining to transportation of general commodities by Motor Carriers by the Interstate Commerce Commission.
8. Carrier shall be liable for full actual loss resulting from loss, damage, injury or delay on shipments transported under terms of this Agreement. Full actual loss is the replacement cost of the freight tendered to the Carrier for transportation. All claims for loss and damage shall be handled and processed in accordance with regulations published in the Code of Federal Regulations at 49 CFR Part 370. The terms, conditions or provisions of the governing bill of lading or any other shipping form, tariff or rule utilized shall be subject and subordinated to the terms of this Agreement and in the event of a conflict, this agreement shall govern. This contract cannot be changed, modified, limited or supplemented by reference to any carrier rates, rules, classifications, practice, schedule or tariff.
9. Carrier agrees to indemnify and save harmless Chief Logistics LLC from any and all claims of any nature whatsoever arising out of Carrier's operation and activities hereunder, including without limitations, claims, losses or liability for personal injury, property damage , cargo loss or damage, or any combination thereof, resulting from the negligence or legal liability of Carrier, its employees or agents, which may occur during the performance of services under this Agreement, including court costs and attorney's fees incurred in defending or prosecuting such claims.

BROKER:

By:

Name: *Kennan L. Hill*

Title: President

Date: 4/20/2017

Witness or Notary

CARRIER:

By: _____

Name: _____

Title: _____

Date: _____

Date

CHIEF LOGISTICS

Certificate of Insurance Request

*****URGENT*****

Carrier on a load for today

Please provide us with a copy of the certificate listing cargo and auto liability insurance for :

Insured: _____

Listing us as certificate holder:

Chief Logistics, LLC

PO Box 10

Seagrove, NC 27341

We need a copy faxed to 336-873-9219 ASAP

Thank you!

April Cheek

Logistics Coordinator

Chief Logistics, LLC

acheek@chiefexpress.com

P 336-873-1100 x 261

F 336-873-9219

**CHIEF EXPRESS &
LOGISTICS**
YOUR LEADING TRUCKLOAD CARRIER

Payment Disbursement Authorization Form

I hereby authorize Chief Express LLC to initiate credit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called DEPOSITORY, to credit the same to such account. This authority is to remain in full force and effect until Chief Express LLC has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Chief Express LLC and DEPOSITORY a reasonable opportunity to act on it.

Please print or type the following information:

Name _____ Tax ID _____

Phone# _____ Fax# _____

Mailing Address _____

Bank Name _____

Name on Account _____

Account Type Checking Savings ABA Routing Number _____

Account Number _____
(to avoid payment errors, please verify these numbers with your bank)

Please provide an email address for remittance advices below:

Contact Name _____

Signature _____ Date _____

Please fax this completed form to (336) 873-9219 Attention: Accounts Payable
and mail original to Chief Express, LLC

PO Box 10
Seagrove, NC 27341

Thank you for your continued great service!

***** ACCOUNTS REQUIRING A PAPER CHECK WILL INCUR A FEE OF \$3.50 *****

PM-25
(Rev. 1/95)

SERVICE DATE
October 15, 1997

FEDERAL HIGHWAY ADMINISTRATION

LICENSE

MC 325335 B

CHIEF LOGISTICS, L.L.C.
SEAGROVE, NC, US

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). Applicant shall also render reasonably continuous and adequate service under this authority. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Thomas T. Vining
Chief, Licensing and Insurance Division

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2128-0017. Public reporting for this collection of information is estimated to be approximately 10 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



Broker's or Freight Forwarder's Surety Bond under 49 U.S.C. 13906

FORM BMC-84

Bond Number: 3369289

Filer FMCSA Account Number: **MC#325335**

KNOW ALL MEN BY THESE PRESENTS, that we, Chief Logistics, J.C. COPY
(Name of Broker or Freight Forwarder)
 of 236 North Broad Street
(Street) Seagrove North Carolina 27341
(City) (State) (Zip)
 as PRINCIPAL (hereinafter called Principal), and SureToc Insurance Company
(Name of Surety)

a corporation, or a Risk Retention Group established under the Liability Risk Retention Act of 1986, Pub. L. 99-563, created and existing under the laws of the State of Texas (hereinafter called Surety), are held and firmly bound unto the United States of

America in the sum of \$75,000 for a broker or freight forwarder, for which payment, well and truly to be made, we bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal is or intends to become a Broker or Freight Forwarder pursuant to the provisions of Title 49 U.S.C. 13904, and the rules and regulations of the Federal Motor Carrier Safety Administration relating to insurance or other security for the protection of motor carriers and shippers, and has elected to file with the Federal Motor Carrier Safety Administration such a bond as will ensure financial responsibility and the supplying of transportation subject to the ICC Termination Act of 1995 in accordance with contracts, agreements, or arrangements therefore, and

WHEREAS, this bond is written to assure compliance by the Principal as either a licensed Broker or a licensed Freight Forwarder of Transportation by motor vehicle with 49 U.S.C. 13906(b), and the rules and regulations of the Federal Motor Carrier Safety Administration, relating to insurance or other security for the protection of motor carriers and shippers, and shall inure to the benefit of any and all motor carriers or shippers to whom the Principal may be legally liable for any of the damages herein described.

NOW, THEREFORE, the condition of this obligation is such that if the Principal shall pay or cause to be paid to motor carriers or shippers by motor vehicle any sum or sums for which the Principal may be held legally liable by reason of the Principal's failure faithfully to perform, fulfill, and carry out all contracts, agreements, and arrangements made by the Principal while this bond is in effect for the supplying of transportation subject to the ICC Termination Act of 1995 under license issued to the Principal by the Federal Motor Carrier Safety Administration, then this obligation shall be void, otherwise to remain in full force and effect.

The liability of the Surety shall not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments shall amount in the aggregate to the penalty of the bond, but in no event shall the Surety's obligation hereunder exceed the amount of said penalty. The Surety agrees to furnish written notice to the Federal Motor Carrier Safety Administration forthwith of all suits filed, judgements rendered, and payments made by said Surety under this bond.

This bond is effective the 1st day of October, 2014, 12:01 a.m., standard time at the address of the Principal as stated herein and shall continue in force until terminated as hereinafter provided. The Principal or the Surety may at any time cancel this bond by written notice to the Federal Motor Carrier Safety Administration at its office in Washington, DC, such cancellation to become effective thirty (30) days after actual receipt of said notice by the FMCSA on the prescribed Form BMC-36, Notice of Cancellation Motor Carrier and Broker Surety Bond. The Surety shall not be liable hereunder for the payment of any damages herein before described which arise as the result of any contracts, agreements, undertakings, or arrangements made by the Principal for the supplying of transportation after the termination of this bond as herein provided, but such termination shall not affect the liability of the Surety hereunder for the payment of any such damages arising as the result of contracts, agreements, or arrangements made by the Principal for the supplying of transportation prior to the date such termination becomes effective.

The receipt of this filing by the FMCSA certifies that a Broker Surety Bond has been issued by the company identified above, and that such company is qualified to make this filing under Section 387.315 of Title 49 of the Code of Federal Regulations. Falsification of this document can result in criminal penalties prescribed under 18 U.S.C. 1001.

IN WITNESS WHEREOF, the said Principal and Surety have executed this instrument on the 1st day of October, 2014.

PRINCIPAL

Chief Logistics, L.L.C.
COMPANY NAME
236 North Broad Street Seagrove
STREET ADDRESS CITY
North Carolina 27341 336-873-1100
STATE ZIP CODE TELEPHONE NUMBER

(type or print Principal officer's name and title)

(Principal officer's signature)

(type or print witness's name)

(witness's signature)

SURETY

SureTec Insurance Company
COMPANY NAME
1330 Post Oak Blvd, Suite 1100 Houston
STREET ADDRESS CITY
Texas 77056 215-766-1990
STATE ZIP CODE TELEPHONE NUMBER

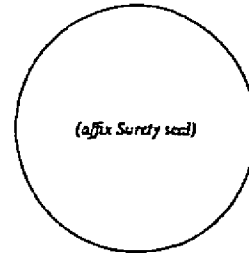
John D. Weisbro, Attorney-in-Fact

(type or print Principal officer's name and title)

(Principal officer's signature)

(type or print witness's name)

(witness's signature)



(affix Surety seal)