



[www.ritewayts.com](http://www.ritewayts.com)

Toll Free: 866-606-6148 \* Fax: 888-678-6040

Email: [contact@ritewayts.com](mailto:contact@ritewayts.com)

Dear New Customer:

Your company and drivers have places to go and getting there is becoming more complicated every day. **Rite-Way Transportation** is here to help.

**Permits Services:** Oversize/Overweight (Single Trip & Annuals), Divisible Loads and Trip & Fuel permits. We cover all 50 states, the District of Columbia, counties and municipalities.

**Pilot Car Services:** Nation wide dispatch with properly equipped, certified and insured pilot car drivers.

**Route Surveys:** Accurate and reliable route surveys ensure your drivers and loads arrive safely.

**Compliance Consulting:** Ensure your fleet is within regulation to reduce costly fines and delays.

Rite-Way is here to get you and your business where you need to go. Please feel free to contact us anytime at (585) 486-9712 or Toll Free at (866) 606-6148.

Check out our services online at [www.ritewayts.com](http://www.ritewayts.com), check us out on **Twitter** at RiteWayPermits or Facebook [@facebook.com/Riteway.Transportation](https://www.facebook.com/Riteway.Transportation).

Thank you for choosing Rite-Way Transportation Services.

Sincerely,

Rite-Way Staff



# CREDIT CARD AUTHORIZATION

Please complete the information below:

Company Name:

Billing Address:

City:

State:

Zip:

Phone:

Email:

Preferred delivery method of invoices and receipts: FAX  EMAIL

Account Type:  Visa  MasterCard  AMEX  Discover

Cardholder Name:

Account Number:

Expiration Date :

CVV2 (3 digit number on back of Visa/MC/Discover, 4 digits on front of AMEX)

I authorize Rite-Way Transportation Services LLC to charge the above referenced credit card for oversize/overweight hauling permits, load escorts and related services as necessary.

SIGNATURE:  DATE:

(Typed Name Will Act as Signature)

FOR OFFICE USE ONLY:

Received by  Date

Customer Code C-



**Rite-Way Customer**  
**Information**

Business Name:  Federal ID number:

Address:  US DOT:

City:  State:  Zip:

Contact Name:  Title:

Phone:  Fax:

Email:

How did you find out about Rite-Way Transportation Services?

**Type of Business:**  **In Business Since:**

Legal form under which business operates:

LLC  Corporation  Partnership  Proprietorship

Parent Company (if applicable):

Name of Company Principal responsible for business transaction:

Address:  City:  State:

Zip:

Phone:  Fax:

I hereby certify that the information contained herein is complete and accurate.

Print Name:

Signature:  Date:

(Typed Name Will Act as Signature)

