Carrier Onboarding Packet

Brodus Dispatch & Logistics Management LLC

Keeping Trucks Moving. Managing Logistics. Building Partnerships.

813-543-6377 | brodusdispatchlogistics@gmail.com | www.bdlogisitcs.live

Welcome to the Brodus Network
Thank you for choosing Brodus Dispatch & Logistics Management. This packet gives us everything we need to set you up with brokers, book loads that fit your truck and your schedule, and get you paid on time. Please complete every section, sign where indicated, and return it with the documents listed below. Questions? Call or text 813-543-6377.

Documents to Attach (check each one included)	
☐ MC Authority Letter (Operating Authority Certificate)	☐ W-9 (signed and dated)
☐ Certificate of Insurance (Auto Liability & Cargo)	☐ Driver's CDL (front and back)
☐ Driver's DOT Medical Card	☐ Truck & Trailer Registration
☐ Notice of Assignment (if you factor)	☐ Voided check or bank letter (if not factoring)

Section 1: Company & Authority Information

Legal Company Name	
DBA (if any)	
Owner / Principal Name	
Business Address	
City / State / ZIP	
Office Phone	
Cell Phone	
Email	
MC Number	
USDOT Number	
Date Authority Granted	
EIN (Tax ID)	
Business Type	☐ Sole Proprietor ☐ LLC ☐ Corporation ☐ Other: _____
Number of Trucks / Drivers	
ELD Provider	

Section 2: Insurance Information

Insurance Company	
Policy Number	
Auto Liability Limit	$
Cargo Coverage Limit	$
Reefer Breakdown Coverage	☐ Yes ☐ No ☐ N/A
Policy Expiration Date	
Insurance Agent Name	
Agent Phone / Email	

Please ask your agent to list Brodus Dispatch & Logistics Management LLC as a certificate holder.

Section 3: Equipment Information

Equipment Type	☐ 26' Box Truck ☐ Hot Shot ☐ 53' Dry Van ☐ Flatbed ☐ Step Deck ☐ Reefer ☐ Other: _____
Truck Year / Make / Model	
Truck Unit # / VIN	
Trailer Length / Year	
Trailer Unit # / VIN	

Max Legal Payload (lbs)	
Securement on Board	☐ Straps ☐ Chains & Binders ☐ Tarps ☐ Load Locks/Bars ☐ Edge Protectors
Other Equipment	☐ Pallet Jack ☐ Liftgate ☐ Ramps

Section 4: Driver Information

Driver Name	Cell Phone	CDL # / State	Medical Card Exp.	Endorsements

Endorsements: H (Hazmat), N (Tanker), X (Hazmat + Tanker), TWIC card. List all that apply.

Section 5: Operating Preferences

Home Base (City, State)	
Preferred Lanes / Regions	
States You Will NOT Run	
Home Time Schedule	☐ Daily ☐ Weekends ☐ Every ___ days ☐ Flexible
Minimum Rate Per Mile	$
Max Deadhead Miles	

Load Types Accepted	☐ Multi-stop ☐ Team ☐ Touch Freight ☐ Hazmat ☐ Overnight / Weekend
Best Way to Reach You	☐ Call ☐ Text ☐ Email Best hours: _____
Who Approves Loads?	

Section 6: Payment & Factoring

Do You Use a Factoring Company?	☐ Yes ☐ No
Factoring Company Name	
Factoring Contact / Phone / Email	
Invoice Submission Email	
Preferred Payment Method for Dispatch Fees	☐ ACH ☐ Zelle ☐ Factoring Deduction ☐ Other: _____

Section 7: Free 14-Day Trial Offer

Try Brodus Dispatch Free for 14 Days
New carriers receive 14 days of full dispatch service with **no dispatch fee**. During your trial we will set you up with brokers, find and negotiate loads, handle rate confirmations and paperwork, and stay in contact with you from pickup to delivery. After day 14, service continues at our standard dispatch fee of _____% of gross load revenue unless you give written notice that you wish to stop.

Trial Start Date	

Trial End Date	
Continue After Trial?	☐ Yes, continue at the standard fee ☐ I'll decide at the end of the trial
Carrier Initials	

Section 8: Share Your Experience (Video Testimonial)

Tell Other Carriers How We Performed for You
At the end of your 14-day trial, we'd love a short video (30 to 90 seconds) about your experience with Brodus. Record it on your phone and text or email it to us. A few ideas to talk about: • How many loads we booked and how the rates compared to what you expected • How we communicated with you during pickup and delivery • How much time we saved you on brokers, paperwork, and setup • Whether you would recommend Brodus to another carrier, and why

Willing to record a video testimonial?	☐ Yes ☐ Maybe later ☐ No thanks
How we may use it	☐ Website ☐ Social media ☐ Marketing materials ☐ Internal use only
Name / Company to display	☐ Full name & company ☐ First name only ☐ Company only
Send video to	Text: 813-543-6377 | Email: brodusdispatchlogistics@gmail.com

By checking "Yes," you allow Brodus Dispatch & Logistics Management LLC to use your video, name, and company name in the ways selected above. You may withdraw this permission at any time by written notice; we will remove the video from future use.

Carrier Signature	
Date	

BRODUS
DISPATCH & LOGISTICS LLC

Section 9: Agreement & Authorization

By signing below, I confirm that the information in this packet is true and complete. I authorize Brodus Dispatch & Logistics Management LLC to:

☐ Act as my dispatcher and represent my company to brokers and shippers
☐ Complete broker setup packets on my behalf using the information provided
☐ Sign rate confirmations on my behalf (Limited Power of Attorney)
☐ Verify my authority, insurance, and safety record with FMCSA and my insurance agent

I understand that I may accept or decline any load offered, that Brodus is a dispatch service and not a freight broker or carrier, and that the full terms of service are set out in the separate Dispatch Service Agreement.

Carrier Company Name	
Authorized Signature	
Printed Name & Title	
Date	
Brodus Representative	
Date	

For Office Use Only

Verification Step	Done	Date / Initials
Authority active on FMCSA SAFER	☐	
Authority age noted (days active)	☐	
Insurance on file with FMCSA	☐	
COI verified by phone with agent	☐	
CSA scores and out-of-service history reviewed	☐	
W-9, CDL, medical card, registration received	☐	
14-day trial start date logged	☐	
Testimonial follow-up scheduled for trial end	☐	