# New Carrier Setup Checklist

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| --- | --- | --- | --- | --- | --- |
| CARRIER INFORMATION | | | | | |
| SCAC: | | TIN: | DUNS: | DOT MC: |
|  | |  |  |  |
| SAMs UEI | | SAMs CAGE CODE | SAMs Expiration Date |  |
|  | |  |  |  |
| Name: |  | | | | |
| Address: |  | | | | |
| Telephone number: |  | | | | |
| Fax number: |  | | | | |
| Tender Point-of-Contact, E-mail Address & Telephone Number: |  | | | | |
| Government Dispatch Point-of-Contact, E-mail Address & Telephone Number: |  | | | | |
| Billing Point-of-Contact, E-mail Address & Telephone Number: |  | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| CHECKLIST | | Date Rec’d | Expiration Date |
|  | Completed/Signed VA 744 for each mode offered |  |  |
|  | TSP Certificate of Eligibility |  |  |
|  | TSP Letter of Intent |  |  |
|  | Rate Tables for each mode offered. |  |  |
|  | Certificate of Liability Insurance |  |  |
|  | Check SAM for ineligibility |  |  |
|  | **STOP! ARE ALL ABOVE DOCUMENTS ACCEPTED** |  | |
|  | Completed VA 10091, Vendor FSC File Request Form |  | N/A |
|  | Carrier TIN “Vendorized” in IPPS (enter Date Checked) |  | |
|  | Rates entered in Sesame/LTL Estimator (Date Complete) |  | |

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| --- | --- | --- |
| Carrier Approved for va use | | |
| Name | Signature | date |
|  |  |  |