



## Central Railroad of Indiana

A RailAmerica Company



### Freight Tariff CIND 4010-F

(Cancels FT CIND 4010 E)

NAMING  
LOCAL & PROPORTIONAL RATES  
ON CARLOADS OF GRAIN BETWEEN STATIONS  
OF  
THE CENTRAL RAILROAD OF INDIANA

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This tariff applies on interstate traffic and intrastate traffic in the States of Ohio and Indiana

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#### NOTICE

The provisions herein will, if effective, not have a negative impact on the quality of the human environment or energy consumption. Governed, except as otherwise noted, by the Uniform Freight Classification (UFC), as provided in Item 5

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Issued: December 1, 2009

Effective: January 1, 2010

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ISSUED BY:  
CENTRAL RAILROAD OF INDIANA  
11427 REED HARTMAN HIGHWAY, SUITE 214  
CINCINNATI, OH 45241

<b>APPLICATION OF RULES AND ACCESSORIAL CHARGES</b>	
<b>ITEM 10</b>	This Tariff, unless otherwise noted, is governed by all rules and charges of RA 1000, FT CIND 9002 series, FT CIND 7006 Series, FT CIND 6006 Series and FT CIND 6007.
<b>PAYMENT AND CREDIT TERMS</b>	
<b>ITEM 90</b>	<p>All charges under this tariff must be prepaid, unless a satisfactory line of credit is established with CIND. Charges for services rendered under terms of this tariff will accrue against the customer located on the CIND, unless other arrangements have been made with CIND prior to performance of service. An Application for Credit Form is appended to this tariff.</p> <p>All payments for services covered herein are due and payable within fifteen (15) days following the Freight Bill date. The rules applicable to payments and credit terms are in accordance with those found in 49 CFR 1320. Payments received after the expiration of the credit period shall be subject to a service charge of one and one-half percent (1 1/2%) per month (or fraction thereof) of the outstanding balance.</p>
<b>LIST OF APPLICABLE COMMODITIES</b>	
<b>ITEM 200</b>	Rates named in this Tariff making reference to this Item will apply on straight carloads of the following commodities as described in STCC 6001 Series only
<b>STCC</b>	<b>COMMODITY</b>
01-1XX-XX	Field crops
<b>LOCAL RATES</b>	
<b>ITEM 405</b>	<p>General Rules and Application of Rates:</p> <ul style="list-style-type: none"> <li>(1) Rates applicable in privately owned or leased equipment (See Note 2) or CIND controlled equipment, subject to availability.</li> <li>(2) No mileage allowance will be paid on privately owned or leased cars.</li> <li>(3) Unless otherwise provide CIND will not absorb any switching in these rates</li> <li>(4) Rates are in dollars per car</li> <li>(5) ROUTE: CIND direct, reverse application applies on all rates only on rejected loads going back to origin.</li> <li>(6) Subject to FT CIND 9002 fuel surcharge provisions</li> </ul>
<p><b>Origin :</b>  St. Paul, IN  St. Paul, IN  Greensburg, IN  Greensburg, IN  Greensburg, IN</p>	<p><b>Destination:</b>  Cincinnati, OH (CSXT beyond)----\$460 RR Cars-----\$360 Pvt. Cars  Cincinnati, OH (NS beyond)-----\$510 RR Cars-----\$410 Pvt. Cars  North Bend, OH-----\$425 RR Cars-----\$335 Pvt. Cars  Cincinnati, OH (CSXT beyond)----\$425 RR Cars-----\$335 Pvt. Cars  Cincinnati, OH (NS beyond)-----\$485 RR Cars-----\$385 Pvt. Cars</p>

# Central Railroad of Indiana

11427 Reed Hartman Highway • Suite 214 • Cincinnati, OH • 45241 • 561-226-6809 • Fax 561-241-5397 •

Email Address: nina.manning@railamerica.com

## Application for Credit

Line of Credit Requested \$ \_\_\_\_\_ Present Balance \$ \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Company Name \_\_\_\_\_ Phone \_\_\_\_\_  
(Area code & number)

D/B/A \_\_\_\_\_ For Past \_\_\_\_\_ Years

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Former Business Address (If Applicable) \_\_\_\_\_

Federal Tax I D Number \_\_\_\_\_

**OWNERSHIP:**  Sole Owner  Partnership  Corporation

Date Started/Incorporation Date \_\_\_\_\_ Have you ever operated under a different name? Yes \_\_\_ No \_\_\_

If yes, give name and address \_\_\_\_\_

### TRADE REFERENCES: (Minimum of 3)

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Acct. No. \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Acct. No. \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Acct. No. \_\_\_\_\_

**BANK REFERENCE:**  Checking  Savings  Loan

Name \_\_\_\_\_ Dept. \_\_\_\_\_ Acct. No. \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone No. \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

TAX EXEMPTION #: \_\_\_\_\_ STATE ISSUED: \_\_\_\_\_

**ADDITIONAL INFORMATION TO BE  
COMPLETED ON NEXT PAGE**



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**OUR TERMS ARE NET 15 DAYS FROM DATE OF INVOICE. APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY, AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE TO TERMS. A SERVICE CHARGE OF 1 1/2% PER MONTH, WHICH IS AN ANNUAL RATE IF 18%, WILL ACCRUE 30 DAYS AFTER INVOICE DATE.**

**I AUTHORIZE YOU TO CONTACT REFERENCES AND TO OBTAIN INFORMATION FROM OUTSIDE RESOURCES THAT MAY BE NEEDED TO OBTAIN CREDIT.**

**THE APPLICATION HAS BEEN CAREFULLY PREPARED BY THE UNDERSIGNED AND IS TO MY KNOWLEDGE COMPLETE, ACCURATE, AND TRUTHFUL.**

**IF MY ACCOUNT IS ACCEPTED, I AGREE TO PAY ACCORDING TO YOUR TERMS OF SALE. I FURTHER AGREE TO PAY ALL COLLECTION COSTS AND EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEES INCURRED BY YOU IN COLLECTING OR ATTEMPTING TO COLLECT SUCH ACCOUNT.**

\_\_\_\_\_  
FIRM NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

## INDIVIDUAL PERSONAL GUARANTEE

Date \_\_\_\_\_

I, \_\_\_\_\_, residing at \_\_\_\_\_

For and in consideration of your extending credit at my request to \_\_\_\_\_  
(Name of Company)

(herein referred to as the "Company"), of which I am \_\_\_\_\_, hereby personally guarantee to you the  
(Title)

payment at \_\_\_\_\_ in the State of \_\_\_\_\_ of any obligation of the Company and hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do waive notice of default, non-payment, and notice thereof and consent to any modification of renewal of the credit agreement hereby guaranteed.

WITNESS \_\_\_\_\_ GUARANTOR \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature) (Signature)

ADDRESS \_\_\_\_\_

## JOINT PERSONAL GUARANTEE

Date \_\_\_\_\_

We, \_\_\_\_\_ and \_\_\_\_\_ his/her \_\_\_\_\_ residing at \_\_\_\_\_

\_\_\_\_\_, for and in consideration of your extending credit at my request to \_\_\_\_\_

(Name of Company) (herein after referred to as the "Company"), of which \_\_\_\_\_  
(Name)

is \_\_\_\_\_, hereby personally guarantee to you the payment at \_\_\_\_\_  
(Title)

in the State of \_\_\_\_\_ of any obligation of the Company and we hereby agree to bind ourselves to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. We do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

WITNESS \_\_\_\_\_ GUARANTOR \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature) (Signature)

WITNESS \_\_\_\_\_ GUARANTOR \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature) (Signature)



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