



CREDIT APPLICATION

Date MM / DD / YYYY

Account Type Land Air Sea

COMPANY INFORMATION

Company Name _____

DBA _____ Related CO(s) _____

Address _____

Billing Address _____

Phone Number _____ Fax Number _____ HST _____ QST _____

Credit Limit Requested _____ Shipments/Year _____

Nature of Business _____ Years In Business _____

Name of Principal _____ Title _____

Name of Principal _____ Title _____

A/P Supervisor _____ Controller _____ Phone _____

BANKING INFORMATION

Bank Name _____ Phone Number _____ Fax Number _____

Address _____

Contact _____ Account Number _____ Bank Line of Credit _____

THREE TRADE REFERENCES

Name _____ Phone Number _____

Address _____ Contact _____

Name _____ Phone Number _____

Address _____ Contact _____

Name _____ Phone Number _____

Address _____ Contact _____

AUTHORIZATION TO RELEASE BANKING INFORMATION

Completed By _____ Title _____ Signature _____

Please allow 2-3 business days to process your credit application