

CREDIT APPLICATION

201 CREDITSTONE ROAD, CONCORD, ON, 14K 0C2 PH, 416-798-4965.

| BUS | 1201 CREDITSTONE ROAD, CONCORD, ON, L4K 0C2 PH. 416-798-4965 SINESS INFORMATION | , | | |
|---|--|---|--|--|
| LEGAL BUSINESS NAME: | PHONE#: | | | |
| TRADE NAME/OPERATING AS: | | | | |
| COMPLETE SHIPPING ADDRESS: | | | | |
| BILLING ADDRESS (IF DIFFERENT FROM ABOVE): | | | | |
| PHONE#: | | | | |
| YEAR CURRENT BUSINESS STARTED: | YEAR CURRENT OWNERSHIP STARTED: | | | |
| PE OF OWNERSHIP: CORPORATION PARTNERSHIP PROPRIETORSHIP LIMITED OTHER | | | | |
| ATURE OF BUSINESS: CREDIT REQUIRED: /MONTH | | | | |
| D-U-N-S NUMBER: TAX EXEMPT: YES NO IF YES, PLEASE PROVIDE GST/HST#: | | | | |
| DOES YOUR COMPANY HAVE A WEBSITE YES NO IF YES, PLEASE SPECIFY: | | | | |
| DOES YOUR COMPANY BELONG TO ANY PROFESSIONAL ASSOCIATION? YES NO IF YES, PLEASE SPECIFY: | | | | |
| CONTACT INFORMATION | | | | |
| A/P CONTACT NAME: | EMAIL: | | | |
| PHONE#: | HOW SHOULD WE SEND INVOICES: EDI EMAIL | | | |
| INVOICING EMAIL (IF DIFFERENT FROM A/P): | | | | |
| PRINCIPLE(S) / OFFICERS(S): | | | | |
| NAME (FIRST & LAST) | NAME (FIRST & LAST) | | | |
| TITLE: | TITLE: | | | |
| EMAIL: | EMAIL: | | | |
| BANKING INFORMATION | | | | |
| BANK NAME: | ACCOUNT#: TRANSIT#: | | | |
| ADDRESS: PHONE#: BANK REPRESENTATIVE/RELATIONSHIP MANAGER: | | | | |
| (Please contact your local branch) | | | | |
| BANK CONTACT EMAIL : | | | | |
| CREDIT REFERENCES | | | | |
| COMPANY NAME: | PHONE #: | | | |
| CONTACT: COMPANY NAME: | PHONE #: | | | |
| CONTACT: | EMAIL: | | | |
| COMPANY NAME: | PHONE #: | | | |
| CONTACT: | EMAIL: | | | |
| TERMS OF CREDIT | | | | |
| THE APPLICANT AGREES TO THE TERMS OF NET 30 DAYS FROM DATE OF INVOICE AND NO MONTHLY STATEMENT WILL BE ISSUED. OVER DUE ACCOUNTS ARE SUBJECT TO 2% INTEREST PER MONTH (24% ANNUALLY). ALL FREIGHT CHARGES MUST BE PAID BEFORE ANY CLAIMS CAN BE ACKNOWLEDGED. CLAIMS CAN NOT BE DEDUCTED FROM ACCOUNTS RECEIVABLE. THE APPLICANT GRANTS PERMISSION AND AUTHORIZES THEIR BANK, TO PROVIDE A DETAILED BANK REFERENCE TO VITRAN EXPRESS. THE APPLICANT AGREES TO REIMBURSE VITRAN FOR ALL REASONABLE FEES, INCLUDING LEGAL AND COLLECTION FEES, INCURRED IN THE COLLECTION OF ALL OUTSTANDING RECEIVABLES. | | | | |
| PRINT NAME SIGNATURE | TITLE DATE | | | |
| VITRAN COMPANY USE | | | | |
| | | | | |

| VITTAN CONFANT OSE | | | |
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| | | | |
| 30 DAY AUDIT REQUEST: (EMAIL) | EST. SALES: | _DATE: | |
| ACCOUNT MANAGER: | ACCOUNT CODE: | | |
| COMPLETE & EMAIL TO: TORONTO ACCOUNTS RECEIVABLE DEPT AT Creditapps@tfintermodal.com. | | | |