

Application for Credit

Date: _____, 20____

Name of Business: _____

Business Number: _____

Address: _____

Prov/State: _____ Postal Code/Zip: _____

Mailing Address (if different from above): _____

Phone: _____ Fax: _____

Nature of Business: _____

Company is: Corporation Partnership Sole Proprietorship Other

Date Established: _____

Accounts Payable Contact: _____

Credit Required: \$_____

Principals/Owners

_____	_____	_____
Name	Title	Phone #

_____	_____	_____
Name	Title	Phone #

_____	_____	_____
Name	Title	Phone #

Bank Information

Bank: _____ Branch: _____

Contact: _____ Phone #: _____

Account #: _____

Trade References

Supplier: _____

Tel: _____ Fax: _____

Supplier: _____

Tel: _____ Fax: _____

Supplier: _____

Tel: _____ Fax: _____

Terms of payment: The applicant hereby understands that all charges are due payable upon receipt of invoice, and agreed that terms of payment are net 30 day and any discrepancies must be submitted in writing within 7 days. Overdue accounts are subject to a minimum service charge of 2% per month.

The applicant consents to Culberson Trucking Ltd. obtaining credit reports or other information as may be deemed necessary in connection with the establishment of a credit account or for any other direct business requirements.

Date

Company Name

Printed Name

Authorized Signature

Title