



859 Westport Cres  
Mississauga, On L5T 1E7

# Credit Application

Thank you for using All Routes Logistics

**T** 905 564 0022

**F** 1 866 727 4505

**Toll Free** 1 866 864 2176

Date: \_\_\_\_\_

## Company Information

Company Name:		Phone #:	Fax #:
Address:	City:	Prov:	Postal Code:
Billing Address (If Different):	City:	Prov:	Postal Code:
Shipping Address (If Different):	City:	Prov:	Postal Code:
Type of Business:	Commodity Type(s):	Date Business Commenced:	Date Business Incorporated:
Type of Firm:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship

## Owners/Partners/Officers

Name	Title/Position	Contact Information
1.		
2.		
3.		

AMOUNT OF CREDIT REQUIRED FOR MONTHLY TRANSPORTATION SERVICES: \$ \_\_\_\_\_

## Bank Information

Bank Name:	Location:	Account No:	Contact Information:
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## Trade References (Please include at least 2 transportation companies)

Name	Address	Contact Information
1.		
2.		
3.		

\*BILLING REQUIREMENTS  
(Copies only supplied)

P.O.D. \_\_\_\_\_

B/L \_\_\_\_\_

REF# \_\_\_\_\_

OTHER \_\_\_\_\_

\*CUSTOMS INFORMATION

Canadian Broker's Name: \_\_\_\_\_

USA Broker's Name: \_\_\_\_\_

Please indicate if applicable: Do you participate as a    CSA    FAST    C-    TPAT    PIP

The completed Credit Agreement must accompany the Credit Application for approval

**TERMS & CONDITIONS**

This account has been established for use by the applicant only. Authorization to other parties for account usage is expressly prohibited. The applicant is liable for all charges on the referenced account.

Whereas \_\_\_\_\_ (hereinafter the "Applicant") has requested an open account from All Routes Logistics. (hereinafter the "Seller") for the purpose of purchasing transportation/warehousing services on credit, the following terms and conditions shall apply:

1. Credit terms are net 30 days from receipt of invoice.
2. All invoices shall be payable net and all arrears and overdues will bear interest at the minimum rate of 2% per month or 24% per annum. Any applicable discounts will be forfeited on overdue accounts.
3. Cancellation: The Seller reserves the right to cancel this credit facility at anytime without prior notice to the Applicant.
4. Credit Investigation: The Applicant and undersigned shall provide to the Seller on an ongoing basis such as financial information as may be requested and consents to the verification of all information contained in this Application or further information which may subsequently be provided in the future and such personal information as may be deemed necessary. All credit references indicated are authorized to provide whatsoever information may be requested by the Seller or its Agent.

I, the undersigned, hereby authorize All Routes Logistics to obtain such credit reports or other pertinent information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement. Furthermore, by signing this Credit Form below, I declare that all the information supplied in this Credit Application is true and accurate.

I understand and agree to the Terms & Conditions.

Signed at \_\_\_\_\_ in the Province/State of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Per: \_\_\_\_\_  
All Routes Logistics

Per: \_\_\_\_\_  
Applicant

Name: \_\_\_\_\_

(This form must be signed in order to have an account set up.)

(I have authority to bind for the corporation)