

Traders

CUSTOMS BROKERAGE Ltd.

2359 ROYAL WINDSOR DRIVE
UNIT 13
MISSISSAUGA, ONTARIO
L5J 4S9
905-855-1334
FAX: 905-855-1375
www.traderscb.com

CREDIT APPLICATION

Please read the following before completing this credit application: 1) The "Customer"(being applicant #1 and applicant #2 jointly and severally) hereby request to establish credit privileges with TRADERS CUSTOMS BROKERAGE LTD. 2) I/We warrant that all information given in this application is accurate and correct. 3) Further, I/We agree to pay for all purchases within terms and understand that a service charge not to exceed 2% per month will be charged on all overdue accounts. 4) Signatory for a company must be a director or officer of the company and be authorized to enter into contractual agreements.

BUSINESS NAME : _____

REGISTERED LEGAL NAME : _____

ADDRESS : _____

CREDIT LIMIT REQUESTED: \$ _____

IS FIRM: [] LIMITED COMPANY

[] PARTNERSHIP

[] SOLE PROPRIETORSHIP

NUMBER OF YEARS IN BUSINESS: _____

CREDIT CONTACT: _____

PHONE NO.: _____

CRA G.S.T. REG. NO.: _____ RT _____

E-MAIL ADDRESS: _____

CBSA IMPORT NO. _____ RM _____

FAX NO.: _____

BANK NAME AND BRANCH: _____

ACCOUNT MANAGER: _____ PHONE NO.: _____

ACCOUNT NUMBER: _____ FAX NO.: _____

TRADE REFERENCES:

<u>COMPANY NAME:</u>	<u>CITY:</u>	<u>PHONE/FAX NO.:</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

It is agreed and understood by the applicant(s) that payment shall be made within the terms of our agreement for all services rendered by TRADERS CUSTOMS BROKERAGE LTD. Failure to comply with payment schedule may be sufficient cause for TRADERS CUSTOMS BROKERAGE LTD. to suspend credit privileges. We further authorize TRADERS CUSTOMS BROKERAGE LTD. to obtain credit reports, material or other information as deemed necessary from the financial institution provided above, on all applicants and individuals in association with the maintenance and collection of this account or for any other legitimate business reason.

1) _____
SIGNATURE of APPLICANT TITLE DATE

2) _____
SIGNATURE of APPLICANT TITLE DATE

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TRADERS REMARKS:

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CUSTOMER NUMBER CREDIT LIMIT INITIALS APPROVAL DATE