



# Credit Application and Agreement



Company Name \_\_\_\_\_

Physical Address \_\_\_\_\_  Leased  Owned

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal Code/ZIP \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal Code/ZIP \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Accounts Payable Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

### Business Type (check)

Sole Proprietorship  Public Company  Partnership  Private Corporation

### Names of Owners/Directors

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

\*  CFO  Controller  VP Finance (check) Name \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

In the case of proprietorship or partnership, receipt of this form is our authorization to perform required credit reference checks on the business principal(s).

### Nature of Business (check)

Manufacturer  Industrial  Retail  Distributor  Grocery

Load broker  Consumer Goods  Transport Company  Commercial  Other

Length of Time in Business \_\_\_\_\_ # of Employees \_\_\_\_\_

Gross Annual Revenue \_\_\_\_\_ Requested Line of Credit \_\_\_\_\_

GST exempt

How would you like us to contact you?  Phone  E-mail  Fax

### Bank Reference

Bank \_\_\_\_\_ Address \_\_\_\_\_

Account Number \_\_\_\_\_ Account Type \_\_\_\_\_

Contact \_\_\_\_\_ Email Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_



**Trade References**

(you must list at least one transportation company that you are currently dealing with)

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Email address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Email a dress \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Email address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Email address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

In the event that APPS extends credit to the undersigned (hereinafter referred to as Customer) these terms will apply to invoices and payment:

- 1. In addition to freight charges invoices will include charges for accessorial services, fuel surcharge, related costs incurred and all applicable provincial and federal taxes.
- 2. Invoices shall be due within thirty (30) days after the date of the invoice, without any right of deduction or setoff against the invoiced amount without express written authorization from APPS.
- 3. Interest will accrue on all amounts due at a rate of 2% per month.
- 4. Notwithstanding the terms of payment above, in the event that the Customer’s credit rating materially changes, APPS may demand and receive immediate payment of all outstanding amounts regardless of whether they are due or not.
- 5. APPS may hold the delivery of any shipment(s) pending the payment of any and all amounts due.
- 6. The Customer shall be responsible for all costs incurred by APPS to collect any amounts due including, but not limited to, all unpaid invoices, fines, penalties, damages, attorney fees, or other costs which may be incurred by APPS.
- 7. The Customer must communicate any invoice disputes to APPS immediately and in any event within thirty (30) days of the date of the invoice. Failure to advise APPS of a dispute within this time will be deemed to be acceptance of the contents of the invoice and there will be no further right to challenge the invoice.
- 8. In the event that the Customer refuses or is unable to pay any amounts due, APPS is entitled to and will seek recovery from the consignor(s) or consignee(s), as the case may be, for all amounts due, including, but not limited to, all unpaid charges, fines, penalties, damages, attorney fees, or other costs which may be incurred by APPS.
- 9. Third Party Customers - In the event that the Customer is not the beneficial owner of the freight, the Customer shall hold in trust, for the benefit of APPS, all the money the Customer receives from shipper(s), consignors and/or consignees in respect of the transportation and related services provided by APPS. The Customer shall maintain these amounts in an account designated as a trust account in a bank, trust corporation or credit union, shall keep the money held separate from money that belongs to the Customer, deposit any money received in the trust account without delay after its receipt, and disburse the money to APPS subject to the terms and conditions above.

Name of Authorized Person (please print) \_\_\_\_\_ Title: \_\_\_\_\_

Signature (Authorized Signing Officer) \_\_\_\_\_ Date: \_\_\_\_\_

**Please complete and fax to 905.451.2778 and mail the original to:**

APPS Cartage Inc.  
275 Orenda Road  
Brampton, ON L6T 3T7

**Attention: Customer Accounts**

\_\_\_\_\_  
Sales Executive