

## APPLICATION FOR CREDIT ACCOUNT

**Legal Business Name** \_\_\_\_\_

**Operating/Trade Name(s)** \_\_\_\_\_

**Head Office Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Prov/State** \_\_\_\_\_

**Postal/Zip** \_\_\_\_\_ **Tel# ( \_\_\_\_ )** \_\_\_\_\_ **Website Address** \_\_\_\_\_

**Billing Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Prov/State** \_\_\_\_\_

**Postal/Zip** \_\_\_\_\_ **Payables Tel# ( \_\_\_\_ )** \_\_\_\_\_ **Payables Fax# ( \_\_\_\_ )** \_\_\_\_\_

**Payables Contact Name** \_\_\_\_\_ **Payables Email Address** \_\_\_\_\_

<b>Set up for Email billing</b> Yes / No <small>(ADP Open Invoicing also available)</small>	<b>Email address (if different than above)</b> _____ <small>(One email address only)</small>
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**Shipping Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Prov/State** \_\_\_\_\_

Are you GST/HST Exempt? Yes  No  Are you a Freight Broker? Yes  No  Are you GST Zero-Rated? Yes  No

Are you a Franchisee? Yes  No  Has your company used our services in the past? Yes  No

**Business Principal(s)** \_\_\_\_\_ **Number of years in Business** \_\_\_\_\_  
(Current Ownership)

**Type of Business** \_\_\_\_\_ **Credit Limit Requested** \_\_\_\_\_  
(Based on monthly volume expected)

Trade References	Trade 1	Trade 2	Trade 3
Company Name:	_____	_____	_____
Telephone #:	_____	_____	_____
<b>Email Address:</b> <small>(email is mandatory)</small>	_____	_____	_____

**Name of Primary Bank** \_\_\_\_\_ **Telephone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
 \_\_\_\_\_ ( \_\_\_\_ ) \_\_\_\_\_ ( \_\_\_\_ ) \_\_\_\_\_

**Bank Branch Address (Street, City, Prov/State)** \_\_\_\_\_

**Bank Account Number(s)** \_\_\_\_\_

I(we) understand that freight bills are due and payable within 30 days from billing date and agree that payment of freight or miscellaneous charges will not be reduced or withheld because of claims against the carrier. Interest will be charged on account balances over 30 days at a rate of 2% per month. In connection with my application for credit I(we) hereby consent that a credit investigation be conducted.

Signed _____	Title _____	Date _____
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To: \_\_\_\_\_ From: \_\_\_\_\_ Sales # \_\_\_\_\_

**Return signed completed form to:**  
[credit@rbsbulk.com](mailto:credit@rbsbulk.com)