

# APPLICATION FOR CREDIT

Date: \_\_\_\_\_ Amount applied for: \_\_\_\_\_

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

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_

Operating Since: \_\_\_\_\_ Owners Name: \_\_\_\_\_

**Bank Reference:**

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

Telephone: (    ) \_\_\_\_\_ Account # \_\_\_\_\_

Contact: \_\_\_\_\_

**Credit References: Principal Suppliers**

Name	Contact	Telephone
1). _____	_____	_____
2). _____	_____	_____
3). _____	_____	_____

Accounts Payable Contact: \_\_\_\_\_ Telephone (    ) \_\_\_\_\_

Freight Payment Service (if applicable) Name \_\_\_\_\_

*By signing this application, I hereby agree to the following terms and conditions: I acknowledge and agree that all invoices for service are due and payable within thirty (30) days of the date of the invoice. I further warrant that there are no judgments or executions against the business or any of the owners. I authorize Maple Gate to obtain any credit information regarding our business as they see fit, Maple Gate is further authorized to disclose, in response to direct inquiries from any other lender or credit bureau that Maple Gate deems appropriate. Interest charged on overdue accounts at 2% monthly.*

Signed: \_\_\_\_\_ Name (please print) \_\_\_\_\_

Maple Gate Freight Systems Inc. Phone (905) 567-8260 Fax (905) 567-5385

