

## **CREDIT APPLICATION**

Section 1. Company Information																
Company Legal									In business			Date				
Name									since			(mm/yyyy				
Company Trade									Α	ddress	•					
Name								<del></del>								
City							Prov/				-	Postal				
							State				(	Code/ZIP				
Email							Tel						ax			
							This location is					111				
Nature of business						Inis location is					Head Office					
(commodity)																
											Branch					
Type of		Incorporated Pro			etorship	Franch	nise P		Partr	Partnership		Ltd. Co.		Other		
Corporation																
Section 2. Invoice Processing & Contacts																
Mailing address (the address where invoices/statements are to be submitted, if different than above)																
Company i	name	:							Α	ddress	;					
City									Prov/			Postal				
							Stat			Code			ZIP			
Tel				Tel		Fax										
Accounts	Nar	ne		Email	il					Payment						
Payable	Method :															
Contact																
Contacts	Invo			ınt												
(email)		eipt				Statement Additional Contact										
Accessoria		Addıt	onal C	Contac	ct											
Notification							1 1 4	211		1						
Transportation Broker/3PL Name, if applicable (include Broker packet)												M	J#			
(include Br	<u>oker</u>	раскет	)		CC:				1.1949					1		
Please en	CIOSE	all bra	anch/subs	sidiary c	office nam	es and ad	aress	esita	adaiti	onal a	ccou	ints t	or eac	n are	neeaea	1.
Please inc				to be ii	ivoicea ai	rectly or t	to the	addre	ess no	oted at	ove	<u>.                                      </u>				
Section 3				<u> </u>	•	0.16		<u> </u>					\ <u></u>			
Does a thir				ivoices i	or your cor	mpany? II	TES,	pieas	e com	ipiete t	ne		YES		NO	
mailing add			below.						Ι.Α	-1 -1						
Company name							Ad			Address						
O:t-							Pro	/				D 4 -				
City												Postal				
Tol				State				Code/ZIP								
	Tel Fax															
Section 4. Website Access (dayross.com)																
Do you need website access to manage your shipments and retrieve additional documents? If YES NO																
YES, please provide the admin contact information.																
Name Tel								Emai	I							
	_															
Section 5. Banking Information & Credit References (no COD references, please)																
Financial								Α	ccour	nt #						
Institution				-												
Address		City							rov/				ostal			
I	Ī				1			1 9	tata	1		1 (20)	7IP/م	1		

Section 6. Credit References  Please supply at least three transportation references. If none available, please provide other vendors.												
Business Name	Address			Tel		Fax	ors.	Email				
Buomicoo manio	Addiess			101		I UA		Lillali				
GST Exempt (are	YES		NO		Fund	ds	CAD		USD			
transportation com												
GST exempt?)												
Section 7. Service & Shipment Type												
LTL Truckloa			erce Solution	ons	Dedicated Logistics				Logi	stics (Over-t	he-	
		(Home Delivery/			Fleet				d/Intermodal			
Residential)												
Section 8. Logistics Providers (if applicable)												
As a transportation logistics provider, you agree to be responsible and remit payment in full to us for all transportation												
services that we perform for you or your customers regardless of whether you have been paid by your customers or not.  We will not invoice or pursue collection of any charges from any of your customers, provided that in case of default on												
any of our invoices, we reserve the right to pursue recovery against your company and/or your customers. Freight												
charges are due within thirty (30) days of the date of our invoices.												
Section 9. Credit			II h a mayah	ملائد د ما	in thint (20	\ -	f	alea				
1. It is hereby agreed that freight charges will be payable within thirty (30) days from pick-up date.												
<ol><li>It is hereby agreed that freight charges at no time will be withheld because of unsettled claims (freight claims or otherwise).</li></ol>												
3. It is hereby understood and agreed that an investigation of your credit history may be carried out in conjunction												
with this application, and/or at any time in the future as part of a credit review of your account.												
4. Delinquent accounts are subject to cancellation without notice with subsequent third-party action.												
<ul><li>5. All freight charges must be paid before any claims can be processed.</li><li>6. In the event collect charges are refused by consignee, shipper will assume full liability.</li></ul>												
7. Day & Ross Inc. will not provide any original documents.												
8. It is hereby understood and agreed to that should these terms/conditions be altered in any way, this application												
will be declined.												
9. It is understoo Customer.	a that the Credit R	eterences	s provided	nerein	n may be us	ea to c	aetermin	ie tne ci	realt wor	ininess of		
10. It is understoo	d by the customer	that the C	Credit Term	ns/Con	nditions state	ed her	ein appl	y to all	dealings	between		
Customer and	Day & Ross Inc.							-	_			
11. Rates are prov												
12. Before you shi	ght to adjust the ra	ites accoi	raingly, uni Itail our Sh	iess in	IS Was decia	area in anditio	iitialiy ar ans at da	na inciu	aea in in wides	e pricing.		
13. If payment terr	ns are not indicate	d on the	BOL, the s	shipper	r (consignor	) will a	utomati	cally be	charged	l.		
14. All overdue ac	counts are subject	to a 2% i	interest cha	arge p	er month (2	4% pe	r annun	າ). ້	_			
15. Applicant agrees to bear all costs including those involved in collecting any unpaid amounts, including but not												
limited to collection suit fees, legal fees, and court costs.												
16. Reissuance of lost or misplaced invoices will incur a \$5.00 fee per invoice. 17. A \$25.00 fee will be charged for any payment returned or declined due to Non-Sufficient Funds (NSF).												
	Section 10. Signatures											
PRINT NAME & T	- 4	AMOUNT OF MONTHLY CREDIT REQUIRED										
Official Signature of	of Signing Officer	Nam	es of Princ	cinal/O	wners	Title						
omoiai oignataro c	a digiting differen	Tun		oipai, o								
Date (dd/mm/yyyy)	)						1					
FOR INTERNAL USE ONLY												
Day & Ross				force		Day & Ross						
Sales	Acco			int ID	Terminal (enter code)							
Representative Tariff		Tarif	f Number				Lega	l Contra				
Talli			pplicable)				(If exec	cuted or u	ınder			
		, 1	. ,				review	, attach a	сору)			