



PREMIER TRUCK GROUP



Credit Department Correspondence - 7035 Pacific Circle, Mississauga, ON L5T 2A8
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A. APPLICANT

General Parts and Maintenance Repairs, Commercial Credit Application and Agreement

Legal Business Name: _____

(List all Trade Names, DBA's, Divisions or Subsidiaries)

Street Address:	City:	Province:	Postal Code:
Mailing Address:	City:	Province:	Postal Code:
Phone:	Fax:	E-Mail:	
Ship to Address:	City:	Province:	Postal Code:
Estimated Annual Sales: \$	Person to contact about Account: _____		
Amount of Credit Requested: \$	Type of Business: _____		
DNB DUNS# _____	No. of Employees: _____		
Federal Incorporation# _____	How Long in Business: _____		
Province of Incorporation _____	Purchase Order Required: Yes _____ No _____		
CVOR# _____	Prior Employment (if less than 1 yr): _____		
	Former Business Name: _____		

B. BUSINESS INFORMATION

<input type="checkbox"/> Sole Proprietorship	Province of Incorporation/Organization: _____
<input type="checkbox"/> Partnership	Owner: _____ SIN# _____
<input type="checkbox"/> Limited Partnership	Partner: _____ SIN# _____
<input type="checkbox"/> Corporation	General Partner: _____ SIN# _____
<input type="checkbox"/> Limited Liability Company	President: _____ SIN# _____
<input type="checkbox"/> Other	Vice President: _____ SIN# _____
	Manager: _____ SIN# _____

C. BANK INFORMATION

Bank	Branch	Phone
Officer Contact	Acct No.	Type of Acct.
	Acct No.	Type of Acct.

I hereby authorize bank named above to release information requested for the purpose of obtaining and/or reviewing credit.

Sign Name _____ Print Name _____ Date _____

D. TRADE REFERENCES (Please fill out 3 references)

Trade Reference Name	City/Province	E-Mail	Fax	Contact Name	Product/Service Purchased
1 _____					
2 _____					
3 _____					

***CONSENT:** I (we) hereby authorize PREMIER TRUCK GROUP to obtain/exchange credit or other information as may be deemed necessary to establish and maintain a credit account and agree that PREMIER TRUCK GROUP may keep this info in our Database & that this info may be used for Marketing Purposes. I (we) _____ (Company Name) understand that the account may be subject to a service charge at the rate of 1.5% per month on outstanding balances in excess of 30 days. Accounts not paid within 30 days are considered past due and may cause interruption in credit extended. I (we) further agree to pay collection and/or legal fees incurred by PREMIER TRUCK GROUP in collection of any past due amounts.

We accept payment by cash/cheque/Etransfer or Electronic Funds Transfer(EFT) ONLY for credit accounts. Please initial

NOTE: Please attach copy of your most recent financial Provincial statement.

Signature of **Authorized Officer/Owner**

Title

Print name

Date