

## **CREDIT APPLICATION**

Mailing Address:

375 - Unit 8, 6014 Vedder Rd

Chilliwack, BC V2R 5P5

Please complete and return to our credit representative at billing@linterra.ca

 $\ensuremath{^*}$  Required - incomplete information will result in denial of credit.

ASSIGNED TERM & LIMIT

INQUIRIES: 604-701-3850 | billing@linterra.ca

COMPANY NAME *			PHONE*			AP CONTACT - NAME	•
BILLING ADDRESS*			EMAIL*			AP CONTACT - PHON	F*
DILLING ADDRESS			LIVIAIL			TAP CONTACT - FRION	<u> </u>
CITY*	POSTAL*		WEBSITE			AP CONTACT - EMAIL	•
WNER/PRINCIPLE *			OWNER/PRINCIPLE PHONE *			BUSINESS START DATE (MM/DD/YYYY) *	
BUSINESS TYPE *:	PST EXEMPT?	••			BUSINESS RE	<u> </u> GISTRATION#*:	
If Other - specify:	If Yes - provide	REG#:		-	PURCHASE O	RDERS REQUIRED?*	
CREDIT-CARD INFORMATION - com	plete all fields to set up a cre	dit card on	file.				
NAME ON CREDIT CARD			CARD NUMBER			(MM/YYYY))	CVC CODE
BANKING INFORMATION							
FINANCIAL INSTITUTION*		TRANSIT	•	BRANCH*		ACCOUNT*	
CONTACT *			PHONE*		ECTIMATES A	MONTHLY DUDOU ASSO	•
CONTACT*			PHONE		ESTIMATED MONTHLY PURCHASES  LINE OF CREDIT REQUESTED *		-
			ļ		LINE OF CRED	II KEGOESTED	-
TRADE REFERENCES * - provide thre	e (3) complete trade referen	ces.					
COMPANY		CONTAC	т	EMAIL			PHONE
		<u> </u>					
		<u> </u>					
TERMS & CONDITIONS  The Customer and the Indemnitor ("Consideration of Linterra granting cree". The Customer will pay for all purchas. The Customer agrees that Linterra's Statements ("Statements") not disput goods without deficiencies.  The Customer understands that Lintprivileges, the Customer must pay all p. The Customer agrees to and underst the due date until payment is received. The Customer understands and agre payment for those purchases.  The Customer agrees to and underst presented in payment, plus a service for credit card information on file.  The Customer understands that Lintered the Customer understands the Cust	dit, the following terms apply es on its account within thirty current price at the time of pied within thirty (30) days of erra may at any time and/or previous outstanding balance ands that any overdue balancin full.  es to pay Linterra for all losse ands that Linterra may charge of \$50 for dishonored che	expected by the statement of the stateme	of the invo	ice date – unlessed on all purchase all be deemed and our credit pri purchases shall indicate terms shall incommend from the provide and numbers se applicable tax(s)	es other arrangements unless other ar courate and constitution of the courate and constitution of the courate and constitution of the courate and courate and any amount of the courage and the cour	ents are made and agreed rangements are made in titute conclusive proof of do so without any prior nelelivery (COD) basis. ge of 2% per month (26.8 urchases made on its accoverdue or the amount of rized company officer in vessing that exceeds \$10	d to in writing. writing. Invoices and/or delivery and acceptance of otice. To reinstate credit % per annum), calculated from count and efforts to collect any dishonored cheque writing will override any existing
terms. The fee will be waived if payme  I, the undersigned, as an authorized of authorize Linterra to obtain credit repo	ficer and/or representative c	of the comp	pany named contact the	l hereon, hereby	certify that the in	formation contained abo	
CREDIT REVIEW COMPLETED BY:			COMMEN	TS/RECOMMEN	NDATION		
APPROVED? YE	PPROVED? YES NO MANAGER AUTHORIZATION						DATE (MM/DD/YYYY)