



### CREDIT APPLICATION

Please complete this form and email to [clientcare@willystrucking.com](mailto:clientcare@willystrucking.com). All information is required, unless noted otherwise.

#### Business Information

Business Name/Trade Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Physical Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Shipping/Receiving Hours: \_\_\_\_\_

Other Branch Locations (permitted to bill to this account):

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Shipping/Receiving Hours: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Shipping/Receiving Hours: \_\_\_\_\_

Contact Information of Partners/Directors responsible for this account:

1. Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Accounts Payable Contact Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Email (for invoices): \_\_\_\_\_ Invoicing Requirements?: \_\_\_\_\_

Shipping/Receiving Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Can you meet our 30-Day Term? Yes \_\_\_\_\_ No \_\_\_\_\_ If "No", state reason: \_\_\_\_\_

Business Industry: \_\_\_\_\_ Years in business: \_\_\_\_\_ GST# \_\_\_\_\_

This business is a:  Proprietorship  Partnership  Corporation Credit Limit Requested: \_\_\_\_\_

#### Business References

1.) Company Name: \_\_\_\_\_ Email: \_\_\_\_\_

2.) Company Name: \_\_\_\_\_ Email: \_\_\_\_\_

3.) Company Name: \_\_\_\_\_ Email: \_\_\_\_\_

The undersigned hereby authorizes Willy's Trucking Service to obtain any information required concerning this application and affirm that the information herein is true and correct. The undersigned also acknowledges that account terms are Net 30 days from the date of invoice and interest is charged at 2% (26.82% per annum) on accounts not paid in accordance with the said terms. Failing to make payments in accordance with these terms, Willy's Trucking Service may take appropriate collection action.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

- Calgary 403.284.1955
- Ft St John 250.785.2364
- Edmonton 780.488.2300
- Grande Prairie 780.830.2300
- Peace River 780.624.2355

