ARMOUR TRANSPORTATION SYSTEMS

350 English Drive
Moncton, NB
Canada E1E 3Y9

Tel: (506) 857-0205
Fax: (506) 861-0271

☐ Armour Transport Inc.
☐ Pole Star Transport Inc.
☐ Armour Courier Services
☐ Armour Logistics Services Inc.

Application for Credit

APPLICANT INFORMATION

Legal Name: ..... Telephone: ( ) .....
Doing Business As: ..... Toll Free: ( ) .....
Address: ..... Facsimile: ( ) .....
..... E-mail: .....
City: ..... Prov.: ..... Postal Code: .....

BILLING ADDRESS (if different from above)

Name: ..... Type of Business: ☐ Incorporated
Address: ..... ☐ Proprietorship
..... ☐ Partnership
City: ..... Prov.: ..... Postal Code: ..... Date of Incorporation: .....

Credit Required: $..... per month Years in Business: ..... This Location is: ☐ Head Office
Nature of Business: ..... ☐ Branch

Specify any special invoicing requirements: .....

Principal/C.E.O.: ..... A/P Contact: ..... Controller: .....

BANKING INFORMATION

Bank Name: ..... Contact: .....
Address: ..... Toll Free: ( ) .....
City: ..... Prov.: ..... Postal Code: ..... Facsimile: ( ) .....

I, the undersigned, declare that, I am duly authorized and as such I authorize my financial institution to disclose to Armour Transportatio Systems all necessary and pertinent information to open this account and/or update it

Signature of Applicant	Printed Name of Applicant	Title	Date

CREDIT REFERENCES (Include TWO other transportation companies that you are currently doing business with)

Reference Company	City	Prov.	Contact	Telephone	Fax

TERMS OF CREDIT

(1) Terms of Sale - Net Seven (7) days
(2) Overdue Accounts are subject to Interest Charges of 1.5% per month
(3) Failure to comply with Terms of Sale will result in termination of credit privileges and termination of all pricing agreements
(4) Freight Charges must be paid in full before Loss or Damage claims can be processed
(5) Armour Transportation Systems may obtain from any credit agency or any other source all the required information to open this accoun and/or update it

I, the undersigned, understand and am authorized to agree to the terms and conditions of this application and declare that all the information provided on this application is true and correct.

Signature of Applicant	Printed Name of Applicant	Title	Date

THIS AREA IS FOR ARMOUR USE ONLY — Credit Limit Approved For (if different from above):

Credit Approved by: Date: Account Number:

Return by Facsimile to (506) 861-0271