



Credit application form

Company name: _____ (Legal name of the person or corporation operating business)

DBA (doing business as) (if different): _____

Address of head office _____ City _____ Postal code: _____

Telephone: () _____ Fax: () _____ In business since (MM/YY): _____

DIRECTORS' NAME: _____

Telephone: () _____ Fax: () _____ Email: _____

FINANCIAL INSTITUTION:

Name: _____ Account number: _____ Branch # _____

Address: _____ Telephone: () _____ Fax: () _____

Account manager: _____

SUPPLIER REFERENCES WITH WHOM YOU ARE PRESENTLY DOING BUSINESS WITH:

Name: _____ Telephone: () _____ Fax: () _____

Name: _____ Telephone: () _____ Fax: () _____

Name: _____ Telephone: () _____ Fax: () _____

Do you belong to a group of merchants or manufacturers? If so, which one? _____

REQUESTED LINE OF CREDIT: _____ \$ Payment terms : Net 20 days of invoicing date

TERMS AND GENERAL CONDITIONS:

Payments: Payments must be received at our offices by the due date printed on the invoice. All late payments will result in the revocation of your credit rights...

Interest: Administration charges of 2% per month (26.82% per year, calculated monthly) on all past due amounts until full payment.

Object: The above conditions will be applied to all accounts due, relative to transport between the two parties during their business relationship...

Credit agreement: The parties have a mutual agreement that V.A. Inc. have in their possession a facsimile (a fax copy) of the credit contract, signed and completed in proper form by the customer...

Credit approval: The current contract will become effective when the credit department confirms their approval.

Claims: All claims relating to damaged merchandise by V.A. Inc. must be brought forward within 10 days following delivery. A decision will be transmitted to the customer by V.A. Inc. a reasonable time period. The procedure will consist of the opening of a

different file and will, at no time interfere with your payable account to V.A. Inc. Concealed damage must be reported to VA Inc. within 24 hour time period from delivery date

Liquidated damages interest: If a customer disregards obligations which must be respected in virtue of this agreement, V.A. Inc. will have recourse to the services of a lawyer for the protection of their rights or their worth. The customer is committed to pay to V.A. Inc. an additional sum, equivalent to 10% of all balances which would be due, in title of claim damages, unless a law abiding document or a regulation exempts it. The same terms and conditions also apply to a case where the account would have to be forwarded to a collection agency. Furthermore, upon request, the customer engages himself to pay to V.A. Inc. all costs, fees and expenses, especially for reasonable legal fees or other costs and expenses resulting from all steps, whether from legal action suits, investigation claims or procedures taken by V.A. Inc. in order to recover the sums due, including all interest in virtue of the present.

Choice of judicial district: The parties elect place of residence in the judicial district of Boucherville. This agreement is subjected to the laws and regulations current in the province of Quebec.

ACKNOWLEDGEMENT:

By signing the present form, the applicant confirms having read and understood all the clauses of the section TERMS AND CONDITIONS. The information supplied on this form will be used for the evaluation of an opening line of credit, to maintain the opened credit, the periodic revision and the perception of any due sum. The agreement and the assent will remain valid for all the duration of the business relation without limit in time. The applicant authorizes his (her, its) and/or his (her) business bank (s) as well as all his (her) suppliers to provide and exchange any information to VA Inc. and/or their representatives as for his accounts, investments, loans, margin and the others, to establish his solvency and loosens them of quite responsibility as for the transmission of those information. The applicant declares that all the information supplied on this request is true. The present request could be cancelled if the information was to show inaccurate.

The applicant declares has read and understood all the terms and conditions of this agreement and agrees to accept them.

Name: _____ (PLEASE PRINT)

Title: _____ (Authorized company officer)

Signature: _____

Date: _____

To be returned for approval to (preferably by email):

VA Inc. • Credit department • 600, Louis-Pasteur Boucherville (Quebec) J4B 7Z1 • 800-363-8175 • Fax: (450) 641-9821 credit@vatransport.com



Customer file (Page 2) (Additional Information Required)

Customer name: _____

Description of Company activities:

- Manufacturer Merchant Transport Company
- Other: _____

Address: _____

City: _____

Province: _____ Postal Code: _____

Telephone :() _____ Fax :() _____

Contact: _____

Title: _____ Ext: _____

Email: _____

Billing address (if different than indicated on 1st page):

Address: _____

City: _____

Province: _____ Postal Code: _____

Telephone :() _____ Fax :() _____

Contact: _____

Title: _____ Ext: _____

Account Payable email: _____

Email to send invoices: _____

Email to send statements (if different than one to send invoices to) _____

Opening hours for your receiving/shipping department:

- Monday: _____ to _____
- Tuesday: _____ to _____
- Wednesday: _____ to _____
- Thursday: _____ to _____
- Friday: _____ to _____
- Closed for lunch from: _____ to _____

Do you usually close for vacation (other than statutory holidays) or inventory?

If yes, please specify when:

	Check which applies	
Does (is) your business :	Yes	No
- Accessible with a 53' trailer?		
- Situated inside a shopping center?		
- Has direct access to the back store?		
- Has a loading/unloading dock at truck level?		
- Situated on a floor other than ground level?		
If yes, do you have a service elevator?		
Do we need to make an appointment before delivering to you? <i>If yes, please take note that there will be an appointment charge applied per shipment</i>		
Are most of your shipments (circle one)	Prepaid PPD	Collect COL

Do you have any other branch offices (warehouse, factory, store)

If yes, specify locations: _____

Do you use any other company names of your bill of lading?

If yes, specify: _____

Special instructions: _____

If you are using your own bill of lading, please join a template of such.