

## KIMTAM LOGISTICS INC. 12 TEAL AVE STONEY CREEK, ON L8E3Y5

## CREDIT APPLICATION / CUSTOMER SET UP/EDIT CUSTOMER INFORMATION FORM

(circle applicable option) CREDIT APPLICATION/CUSTOMER SET UP **EDIT CUSTOMER INFORMATION** (fill out applicable information) **BUSINESS INFORMATION BUSINESS NAME:** ADDRESS: CITY: POSTAL CODE: **ALTERNATE BILLING ADDRESS** ADDRESS: CITY: **POSTAL CODE: ACCOUNTS PAYABLE INFORMATION & CONTACT NAME** NAME: **EMAIL ADDRESS:** PHONE #: FAX #: GST #: PST #: **ACCOUNTS PAYABLE ALTERNATE CONTACT INFORMATION** NAME: **EMAIL ADDRESS:** PHONE #: FAX #: **INVOICE PREFERENCE:** (fill preferred options) **CUSTOMER REQUEST:** SINGLE INVOICE **STATEMENT EMAIL** MAIL **EMAIL ADDRESS: MAILING ADDRESS:** 

OWNERS/PARTNERS:	
1	
2	
3	
DATE BUSINESS STARTED:	
BANK & BRANCH INFO:	
REFERENCES(NAME, PHONE # AND FAX #)	
1	
2	
3	
TAX EXEMPTION:	YES/NO
	TAX EXCEMPT #:
(CIRCLE APPLICABLE OPTION)  CURRENCY:	CAD/USD
	CAD/03D
(CIRCLE APPLICABLE OPTION)	DATE:
REQUESTED BY:	DATE:
THE UNDERSIGNED HEREBY AUTHORIZE	ES THE TRADE REFERENCES AND BANKING INSTITUTION TO PROVIDE
INFORMATION TO KIM-TAM LOGISTICS	INC. FOR THE PURPOSE OF ESTABLISHING CREDIT.
NAME:	SIGNATURE:
POSITION:	DATE:
FOR INTERNAL USE ONLY:	
CUSTOMER:	RATE SHEET/ACC CHARGES:
CREDIT LIMIT:	CREDIT ITEMS:
APPROVED BY:	ENTERED BY:
DATE ENTERED:	CHECKED BY: