



APPLICANT INFORMATION

Legal Company Name:			
<input type="checkbox"/> Incorporated		<input type="checkbox"/> Partnership	
<input type="checkbox"/> Proprietorship			
Doing Business As (if different from above):			
Company Address:			
City:		Prov/State:	
Postal/Zip:		Country:	
Phone:	Fax:	Web:	
Company Contact Name:			Email:
Company Billing Address (if different from above):			
City:		Prov/State:	
Postal/Zip:		Country:	
Phone:	Fax:	Web:	
Accounting Contact:			Email:
Credit Amount Required: \$		Invoice In: <input type="checkbox"/> Canadian Dollars <input type="checkbox"/> US Dollars	
Company Established (dd/mm/yy):		Company Principal Name:	
Type of Business:			
Business No.:		RM _____ (required for B-13's)	

BANKING INFORMATION

Name of Bank:			
Address:			
City:		Prov/State:	
Postal/Zip:		Country:	
Bank Contact Name:		Phone:	Fax:
Account No.:		Branch No.:	

TRADE REFERENCES

1. Company Name:	
Contact Name:	Phone:
Fax:	Payment Terms: Net _____ Days
2. Company Name:	
Contact Name:	Phone:
Fax:	Payment Terms: Net _____ Days



GENERAL TERMS AND CONDITIONS OF SALE

1. Amounts are due 30 days from date of invoice.
2. In connection with such credit extension, the undersigned authorizes and consents to the receipt and exchange of credit information.
3. Any account past due over 30 days is subject to interest at a rate of 2% per month or 24% annually.
4. Claims are to be submitted in writing within 7 days of discovery of damage. No claims shall be paid prior to Cargo Spectrum Forwarding Inc receiving full payment of our freight invoice. Claims should be accompanied by pictures, survey report, proof of notification to the carrier where applicable and any other documents deemed necessary for the successful settlement of any claim.
5. NSF cheques will be subject to a \$40.00 charge.
6. All business undertaken is subject to current CIFFA Standard Trading Conditions. Copies available on request.
7. Cancelled bookings should be communicated a minimum of 24 hours prior to cut off date and earlier where possible.
8. For all purposes, it is agreed that the place of contract shall be the City of Richmond, British Columbia, Canada.

The undersigned on behalf of the applicant has read and hereby accepts the above terms and conditions. The undersigned also authorizes Cargo Spectrum Forwarding Inc to proceed with credit investigation as required.

Date: _____

Print Name: _____

Title: _____

Authorized Signatory: _____