

White Oak Transport - Credit Application

Name of Company: _____

Address: _____ City: _____

Province/State: _____ Postal/Zip: _____

Telephone: (____) _____ Fax: (____) _____

Years in Business: ____ Business Type (Corporation/Partnership etc): _____

Nature of Business: _____

Contacts for Shipping: _____ A/P: _____

Mail invoices to the attention of: _____ Position: _____

Trade/Credit References

Name and address	Telephone
1: _____	_____
2: _____	_____
3: _____	_____

Bank and Branch Information

Bank Name: _____ Branch Address: _____
Account Number: _____

Main Customer Contact: _____ Credit Required: _____

To the best of our knowledge the information given above is true and correct. We hereby authorise White Oak Transport Limited to verify the above credit references and make any enquiry from any credit reporting agencies as deemed necessary and to exchange information as permitted by law.

Name: _____ Position: _____

Signature: _____ Date: _____

Payment due upon receipt. Interest will be charged at the rate of 2% per month on all overdue accounts.

White Oak Transport Limited Use Only

Account Authorised: YES / NO Date: ____/____/____ Signature: _____