



70 Ward Road, Brampton, Ontario L6S 4L5  
Tel: (905)458-1144 or 1-800-388-8947  
Fax: (905)458-5688

Dear Sir/Madam,

We are pleased to welcome you as a client. In order to set up your file we would appreciate having the attached application completed and returned by fax as soon as possible. Be advised that this application will be needed in order to transfer your account from terms C.O.D. to credit.

If you are a holder of Surety Bond or have an application being processed as such we would appreciate a copy with your credit application.

Please do not hesitate to contact us should you have any questions or concerns.

We hope to be of service to you again in the near future.



## **CREDIT POLICY**

### **General:**

The terms, conditions and procedures of credit are established with the cooperation and approval of Holmes Freight Lines Inc.

All information, financial statements, references etc concerning a client will remain strictly confidential and will be used only by Holmes Freight Lines Inc. in order to issue credit.

### **Terms:**

The terms of sale are Net 30 days from the date of billing unless otherwise indicated.

All late payments may result in all future deliveries being C.O.D.

Credit privileges will be terminated once an account becomes delinquent or if checks are returned insufficient funds by your bank.

### **Claims:**

All claims concerning damaged merchandise should be brought to our attention immediately and they will be handled in a reasonable time.

All invoices concerning the damaged merchandise should be paid by the due date and a refund for the claim will be issued.

### **Administrative Fees:**

Any overdue accounts are subject to an administrative fee of 2% per month (24% per annum).

I understand the above terms and conditions and agree to comply with all regulations.

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Please return to the attention of:

ACCOUNTS RECEIVABLE  
HOLMES FREIGHT LINES INC.  
PHONE: (905)458-1144  
A/R FAX: (905)458-4220



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## **CREDIT APPLICATION**

### **Business Information:**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Accounts Payable Contact: Phone: (\_\_\_\_)\_\_\_\_\_ Fax: (\_\_\_\_)\_\_\_\_\_

Date Business Commenced: \_\_\_\_\_

Type of Business: Corporation \_\_\_\_ Partnership \_\_\_\_ Proprietorship \_\_\_\_

Name & Titles of Principals:

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### **Banking Information:**

Name of Banking Institution: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Phone Number: (\_\_\_\_)\_\_\_\_\_ Fax Number: (\_\_\_\_)\_\_\_\_\_

### **References: (We prefer carrier references)**

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Telephone: (\_\_\_\_)\_\_\_\_\_ Fax: (\_\_\_\_)\_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Telephone: (\_\_\_\_)\_\_\_\_\_ Fax: (\_\_\_\_)\_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Telephone: (\_\_\_\_)\_\_\_\_\_ Fax: (\_\_\_\_)\_\_\_\_\_