Truck • Rail • Everything • Else
TREE LS Inc
15 Bonnycastle Court
Winnipeg, MB
R3P 1Z7
431-547-8733

TREE LS Transportation Credit Application

Please sign and complete the following application to help Truck Rail Everything Else Logistic Services Incorporated (TREE LS Inc) better service your Logistics needs.

Company Information

Company Name / Trade Name: _____		
Physical Address: _____		
Billing Address: _____		
Operations Contact(s) Name: _____	Phone #:_____	Email: _____
Accounting Contact(s) Name: _____	Phone #:_____	Email: _____
Credit Limit Required: $_____		

Banking Information

Name of Company's Bank: _____		
Address of Bank: _____		
Bank Phone #: _____	Branch #: _____	Account #: _____

Credit References

1. Company Name: _____	Contact Name & Phone #: _____
Address: _____	Website: _____
2. Company Name: _____	Contact Name & Phone #: _____
Address: _____	Website: _____
3. Company Name: _____	Contact Name & Phone #: _____
Address: _____	Website: _____

Truck ● Rail ● Everything ● Else
TREE LS Inc
15 Bonnycastle Court
Winnipeg, MB
R3P 1Z7
431-547-8733

Credit Terms

Net 30 Days

Conditions:

a) *Accounts opened are due and payable net 30 days of date of invoice.*
b) *Past due accounts are subject to service charges of 2% per month (24%) per annum over 30 days*

Making this application in condition of any credit extended as a result of this application, the application and the undersigned, individually and collectively agree to pay all costs of collection, including reasonable attorney fees incurred in collecting any money owed on any credit attained by any of the people or entities names in this application.

This agreement is without limitation as to amount or any requirements of notice and renders the undersigned legally liable for debts of the applicant.

All information given herein is correct and true and the applicant consents to Truck Rail Everything Else Logistics Services Inc performing all necessary credit inquiries to be made in connection with the credit herby applied for and consents to the disclosure of such information.

Title:_____   **Authorized Signature: _____**

Date:_____   **Name of Above Signature:_____**