

Anwer Werehousing & Logistics

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Credit Application Form

COMPANY INFORMATION		
COMPANY NAME		Date
Address		City
	Pro	ovince Postal
Telephone ()	Fax ()	E-mail
GENERAL INFORMATION		
Principal/Owner	E-mail	Phone #
-	E-mail_	Phone #
(Please Check One) Corpo	pration Accounts Payable Coership Fax#	
BANK INFORMATION Bank Name Address		
Dhana		Fax
Contact		E-mail
TRADE REFERENCES Please	e provide full name, address and p	shone number on all references
1. Company Name	Phone Number	Fax number
Address	200	Contact
2. Company Name	Phone Number	Fax number
Address		Contact
3. Company Name	Phone Number	Fax number
Address		Contact
TERMS AND CONDITIONS		3
All accounts are COD until a credit applicate strictly NET 30 DAYS upon receipt of and conditions. In addition, you authorize process this Credit Application.	f invoice. Signing this agreement i	indicates your acceptance of our terms
Signature	Title	Date
or office use only		
Credit Approved: Amount:	Approved By:	Date: