

Phone: 1-506-325-3850

FAX: 1-506-328-4445

Jolly Farmer® TRANSPORT INC.

56 Crabbe Road
Northampton, New Brunswick E7N 1R6
Canada

CREDIT APPLICATION

BUSINESSNAME _____ DATE _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTALCODE _____

OWNER/MANAGER _____ PHONE NO.(____) _____ - _____ FAX NO.(____) _____ - _____

ACCOUNTS PAYABLE CONTACT _____ D&B RATED _____

YEARS IN BUSINESS _____

**PLEASE take time to fill in all information requested so
that we may process your application without delay.
THANK YOU!**

TRADE REFERENCES:

1. REFERENCE _____ PHONE (____) _____ FAX (____) _____ CONTACT _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

2. REFERENCE _____ PHONE (____) _____ FAX (____) _____ CONTACT _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

3. REFERENCE _____ PHONE (____) _____ FAX (____) _____ CONTACT _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

4. REFERENCE _____ PHONE (____) _____ FAX (____) _____ CONTACT _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

BANK REFERENCES:

1. BANK _____ PHONE (____) _____ CONTACT PERSON _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

ACCOUNT NO. _____ ACCT. TYPE _____ FAX NO. (for faster processing) (____) _____

2. BANK _____ PHONE (____) _____ CONTACT PERSON _____

ADDRESS _____ CITY _____ PROVINCE _____ POSTAL CODE _____

ACCOUNT NO. _____ ACCT. TYPE _____ FAX NO. (for faster processing) (____) _____

ANNUAL PURCHASES _____ MAX. MONTHLY PURCHASES _____
EXPECTED WITH JOLLY FARMER _____ EXPECTED WITH JOLLY FARMER _____

PENDING LAWSUITS AGAINST COMPANY _____

The undersigned hereby authorizes Jolly Farmer to investigate the references listed - pertaining to my/our credit and financial responsibility. The undersigned agrees, if this application is accepted by the Jolly Farmer, to abide by the following terms, and acknowledges that credit privileges, if granted, may be withdrawn at any time. It is agreed that if this account is turned over to an attorney for collection, the purchaser will pay reasonable fees plus cost of collection.

TERMS: NET 35 DAYS

SIGNED _____

PLEASE PRINT NAME _____ TITLE _____