



AUTOMOTIVE  
AGRICULTURAL

TRUCK  
INDUSTRIAL

## APPLICATION FOR CREDIT

Legal Name of Company

Trade Name (If any)

Address

City

Province

Postal Code

Shipping Address(es) (If different)

City

Province

Postal Code

Phone Number

Nature of Business

Date Business Started

Credit Limit Required

Type of Business

Sole Proprietorship

Partnership

Corporation

P.S.T. Number

G.S.T. Number

Accounts Payable Contact Info

Name

Phone Number

Email Address

Purchasing Contact Info

Name

Phone Number

Email Address

Are Purchase Orders Required

Yes

No

Backorders Allowed

Yes

No

Statements + Invoices to be emailed to

Preferred payment method

EFT

Credit Card

Cheque

E-Transfer

**WINNIPEG MB**

515 Oak Point Hwy, R2R 1V2

Tel: 204-633-9272

Toll Free: 1-800-463-4641

Fax: 204-632-6305

**REGINA SK**

559 McDonald St. S4N

4X1 Tel: 306-721-7211

Toll Free: 1-800-667-7211

Fax: 306-721-7215

Name of Bank

Address

City

Province

Postal Code

Phone Number

Transit Number

Account Number

References: Please provide 2 Credit References

1) Name

Address

City

Province

Postal Code

Phone Number

Email Address

2) Name

Address

City

Province

Postal Code

Phone Number

Email Address

1. I HEREBY ACKNOWLEDGE THE FOLLOWING TERMS OF CREDIT WITH WESTRANS COMPANY IN THE EVENT CREDIT IS EXTENDED:

- A) PAYMENT TERMS ARE: NET 30 DAYS FROM DATE OF INVOICE.
- B) FOR ALL PAST DUE AMOUNTS, INTEREST IS COMPOUNDED AT A RATE OF 1.5% PER MONTH (18% PER ANNUM).
- C) ALL GOODS RETURNED FOR CREDIT MUST BE APPROVED BY WESTRANS PARTS DEPARTMENT ONLY.
- D) GOODS RETURNED FOR CREDIT AFTER 30 DAYS ARE SUBJECT TO A 20% RESTOCKING CHARGE.
- E) GOODS NOT ACCEPTED FOR CREDIT WITHOUT ORIGINAL PURCHASE INVOICE NUMBER.
- F) WESTRANS COMPANY MAY DISCLOSE MY CREDIT HISTORY TO CREDIT RATING AGENCIES.

2. I HEREBY CONSENT TO WESTRANS COMPANY OBTAINING BANKING, CREDIT AND FINANCIAL INFORMATION FROM THE BANK AND REFERENCES LISTED ABOVE.

3. I HEREBY CONSENT TO WESTRANS COMPANY CONDUCTING OR CAUSING TO BE CONDUCTED A PERSONAL INVESTIGATION AS DEFINED BY THE PERSONAL INVESTIGATION ACT OF MANITOBA

NAME (PRINT)

SIGNATURE

TITLE

DATE

## Please email back to:

Danielle Pitman  
Accounts Receivable & Credit Manager  
Phone: 204-631-4203 | Fax: 204-694-9415  
[dpitman@westrans.com](mailto:dpitman@westrans.com) | [www.westrans.com](http://www.westrans.com)

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