

Reliable Tire Recycling

Phone: (204)774-0725

Fax: (204) 774-1459

WHOLESALE CREDIT APPLICATION

Limit Required: _____ Date: _____

Registered Name: _____

Sole Proprietorship _____ Corporation _____ Partnership _____

Billing Address: _____ City _____ Province _____ Postal Code _____

Business Phone No. _____ Business Fax No. _____

Shipping Address _____ City _____ Province _____ Postal Code _____

Annual Sales _____ Years Actively Operating _____

Provincial Tax No.: _____ Tire Stewardship No.: _____

CREDIT APPLICANT

PRINCIPALS - NAME	SOCIAL INSURANCE #	HOME ADDRESS	HOME PHONE #	DATE OF BIRTH	DRIVERS LICENSE

Is Purchase Order Required: Yes _____ No _____

Bank Name _____ Bank Address _____ City _____ Province _____

Postal Code _____ Bank Phone # _____ Bank Fax # _____ Account # _____

Please list three trade references with whom you have dealt with in the past 12 months.

NAME	ADDRESS	PHONE

CREDIT TERMS:

1. All accounts are due and payable thirty days from the date of the invoice.
2. Interest will be charged on overdue accounts at the rate of 18% per annum, compounded monthly.
3. The account must be kept current. Failure to do so may result in being placed on a C.O.D. basis.

The reported information is for the purpose of obtaining credit and is warranted to be true.

I/WE agree to maintain the account in accordance with the Credit Terms.

I/WE hereby authorize KROY TIRE to investigate the references herein listed and other data obtained from me pertaining to this credit application.

Authorized Signing Officers

1. _____ 2. _____ 3. _____
(name)

(title)

GUARANTEE

In the event that RELIABLE TIRE RECYCLING extends credit to _____, the corporation, then in consideration therefore, the undersigned agrees and acknowledges that he is jointly and severally liable for payment for all goods and services purchased from or rendered by RELIABLE TIRE RECYCLING to the said entity, and its successors and assigns: under the same terms and conditions of the account which apply to the corporation.

Date _____ Address _____

Signature: _____ Witness: _____

**ORIGINALLY SIGNED APPLICATION MUST BE FORWARDED TO RELIABLE TIRE RECYCLING
BEFORE CREDIT CAN BE ESTABLISHED**