



# CREDIT APPLICATION

3045 Miners Ave  
Saskatoon, SK S7K 8A1  
Phone: 306-934-4295  
Fax: 306-700-2340

**COMPANY NAME:**

Corporation:

Partnership:

Proprietorship:

**Physical Address:**

**Mailing Address:**

**Phone:**

**Fax:**

**Years in Business:**

**Banking Information:**

Bank

Address:

**Accounts Payable Information: \*MUST INCLUDE**

\*Contact Name:

\*Phone & Ext:

\*E-mail address:

**For E-mail billing please provide an address:**

**PLEASE PROVIDE 4 CREDIT REFERENCES WITH FAX/EMAIL INFORMATION**

1) Name:

Location:

Phone:

Fax/Email:

2) Name:

Location:

Phone:

Fax/Email:

3) Name:

Location:

Phone:

Fax/Email:

4) Name:

Location:

Phone:

Fax/Email:

Information Provided by:

***Accounts not paid within terms are subject to an interest rate of 2% monthly finance charge (24% annum)***

TERMS: NET 30 DAYS: Please sign for acknowledgement of these terms.

Signature of authorized agent:

Position in the company:

Date:

Complete and return to the following:

FAX: 306-700-2340

E-mail [kerri@hawklogistics.ca](mailto:kerri@hawklogistics.ca)