



KENWORTH
Québec
L'ULTIME EXPÉRIENCE

Head office | Saint-Nicolas

KENWORTH QUÉBEC INC.

800, Chemin Olivier, Lévis, QC G7A 2N1
P: 418-831-2061 F: 418-831-4913

Branch | Saint-Georges

KENWORTH BEAUCE

2953, 85e rue, Saint-Georges, QC G6A 0C6
P: 418-227-5100 F: 418-227-5110

COMMERCIAL CREDIT APPLICATION

Full legal name: _____
 Trade names (if different): _____
 Address: _____
 City: _____ Zip code: _____
 Phone number: _____ Fax: _____ Cellphone: _____
 Email address: _____
 Account payable contact name: _____
 Account payable phone number: _____
 Years in business: _____ NEQ: _____
 Fleet size of trucks: _____ Number of Kenworth trucks: _____
 GST: _____ QST: _____ HST: _____

BANKING INFORMATION

Bank name: _____ Account #: _____
 Address: _____ City: _____
 Zip code: _____ Contact: _____
 Phone number: _____ Credit limit requested: _____ \$

TRADES REFERENCES

	SUPPLIER	ADDRESS	PHONE NUMBER
1			
2			
3			

*Please provide three (3) references, other than gas suppliers. Mandatory.

GENERAL INFORMATIONS

Main contact for purchases: _____
 Purchase order required: yes ___ no ___ Statement: yes ___ no ___
 Purchase order format : _____ Email address for statement: _____

Names of officers/directors	Title
1) _____	_____
2) _____	_____
3) _____	_____

TERMS AND CONDITIONS

I accept the terms listed below and the general conditions -- Please read carefully and check all boxes:

- I authorize | I, the undersigned, authorize KENWORTH QUÉBEC INC. and its subsidiaries to verify my credit record and at any time obtain credit information about me from any credit bureau which is considered necessary in obtaining and maintaining the margin of credit.
- I accept | Invoiced amount shall be paid within 30 days of date of the invoices (the due date). Interest rate on any invoiced amount will be charged from the due date of the due paiement (2% per month, 26,8% annually). Collection costs will be charged to the client (15% minimum).
- I accept | The parties agree that this agreement is governed under the laws of the Province of Quebec and the parties elect domicile in the judicial District of Quebec, Canada.

I, the undersigned, certifies the above information to be true and correct. I confirm that I have read and understand the present agreement and will honor these commitments.

Signature: _____ **Date:** _____

Name and title, lower case letters: _____

Please return this application for approbation at recevables@kenworthquebec.com or by fax at 418-831-4913.