



CREDIT APPLICATION

Applicant

| | | | |
|-------------|--|---------------------|----------------|
| Trade Name: | | Corporate Name: | |
| Address: | | City / Postal Code: | |
| Phone #: | | Fax #: | Email Address: |

Billing Address

| | | | |
|-------|--|--------------|--|
| Name: | | Address: | |
| City: | | Postal Code: | |

Business Information

| | | | | | |
|--|-------|--------------|--|--------------------|--|
| Sole Proprietorship | | Partnership: | | Corporation: | |
| Total # Employees: | | GST / IRS#: | | Years in Business: | |
| Principles / Owner | Name: | | | Title: | |
| Principles / Owner | Name: | | | Title: | |
| Accounts Payable Contact: | | | | AP Phone #: | |
| E-Invoicing: ** enter email address where invoices are to be submitted | | | | | |

Bank Credit Reference

| | | | |
|---------------|--|------------|--|
| Bank Name: | | Address: | |
| Contact Name: | | Account #: | |
| Phone #: | | Fax #: | |

Trade References

| | | | |
|----------------|--|----------------|--|
| Business Name: | | Email Address: | |
| Contact Name: | | Position: | |
| Business Name: | | Email Address: | |
| Contact Name: | | Position: | |
| Business Name: | | Email Address: | |
| Contact Name: | | Position: | |

Terms & Conditions

Terms of credit are net 25 days from original invoice date. The applicant by signing this form personally agrees and guarantees to Sphere 1 Logistics Inc. payment terms and conditions. It is hereby understood and agreed upon that failure to make any payment within the due dates stipulated, Sphere 1 Logistics Inc., at its sole discretion will have the authority from the client to charge the remaining outstanding balance on the entire agreement effective immediately. Failure of Sphere 1 Logistics Inc. to exercise such right of acceleration of this agreement balance does not waive the right to exercise such a right of acceleration in the future. Interest shall accrue on all past balances at a rate of 1.5% per month. Client agrees that in the event of agreement default, he/she/it shall be responsible for all costs of collection including, but not limited to, all attorney fees and court costs.

I/We the undersigned, certify that the information herein to be true and correct and authorize necessary credit checks required to process this application.

By signing this application, I/We do hereby agree to meet Sphere 1 Logistics Terms & Conditions

**** Please email completed application to accounting@sphereonelogistics.com**

| | | |
|-----------------------------|-------------------------|--------------------|
| X | | |
| <i>Authorized Signature</i> | <i>Title / Position</i> | <i>Date Issued</i> |

Sphere 1 Logistics Inc.
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