

COMPANY INFORMATION

Company Legal Name: _____ Trade Name: _____

Mailing Address: _____

City/Town: _____ Prov./State: _____ Country: _____ Postal Code/Zip: _____

Tel: _____ Fax: _____ Website: _____

Type of Ownership: ☐ Proprietorship ☐ Incorporated ☐ Partnership ☐ Corporation

Date of Incorporation: _____ Nature of Business: _____

Owner/President: _____ Tel: _____ Email: _____

CFO/VP Finance: _____ Tel: _____ Email: _____

Accounts Payable: _____ Tel: _____ Email: _____

Billing Address if different than above.

Company Name / 3rd Party Company Name: _____

Mailing Address: _____

City/Town: _____ Prov./State: _____ Country: _____ Postal Code/Zip: _____

Third Party Contact: _____ Tel: _____ Email: _____

How should we send your invoices? ☐ EDI ☐ PDF ☐ CSV ☐ MAIL

Email where electronic invoicing is to be sent: _____

Invoicing Requirements: ☐ BOL ☐ POD ☐ Load/Carrier Confirmation # ☐ PO # Other (please specify): _____

Funds: ☐ Canadian ☐ U.S. **GST/HST Exempt:** ☐ YES ☐ NO Form attached: ☐ YES ☐ NO

Payment Options: ☐ Cheque ☐ EFT

WEB ACCESS – www.fastfrate.com

Trace your shipments online and obtain Bills of Lading and Proof of Deliveries.

☐ Please check the box if you would like to have access to our website.

BANKING INFORMATION

Financial Institution: _____

Bank Account # _____

Transit #: _____

Institution #: _____

Address: _____

City/Town: _____

Prov./State: _____

Country: _____

Postal Code/Zip: _____

Contact Name: _____

Tel: _____

Fax: _____

Email: _____

Years with bank: _____

CREDIT REFERENCES

1. Company Name: _____

Contact & Title: _____

Tel: _____

Fax: _____

Email: _____

2. Company Name: _____

Contact & Title: _____

Tel: _____

Fax: _____

Email: _____

3. Company Name: _____

Contact & Title: _____

Tel: _____

Fax: _____

Email: _____

CREDIT LIMIT

REQUESTED MONTHLY CREDIT LIMIT \$ _____

Please indicate which company you wish to open an account:

☐ Consolidated Fastrate Inc.
 ☐ Canada Drayage Inc.
 ☐ Fastrate Integrated Logistics
 ☐ Bestway
 ☐ ASL Distribution Services

CREDIT TERMS & CONDITIONS

- By submitting this account application, the party signing this document (the “Applicant”) hereby agrees with Consolidated Fastfrate Inc, Canada Drayage Inc, Fastfrate Integrated Logistics & Bestway (“Fastfrate”):
1. Fastfrate may give or get credit or any other information about the Applicant from: (a) any financial institution, credit reporting agency, rating agency or credit bureau; and (b) any person, firm or corporation with whom the Applicant may have or proposed to have financial dealings.
 2. The Applicant will pay in full without any offset whatsoever all accounts, including all Freight and Accessorial charges, within **thirty (30) days** from the date of invoice or as may otherwise be set out by Fastfrate in their accounts. For greater certainty, the Applicant agrees to pay in full the amount of each account issued by Fastfrate notwithstanding that the Applicant may have or make a claim against Fastfrate.
 3. Terms and conditions of this account application shall form part and be incorporated into any Contract of Carriage between Fastfrate and the Applicant.
 4. Interest on any unpaid amounts will be charged at a rate of **2%** compounded monthly (i.e., 26.82% per year). NSF fees of **\$50** will be applied where insufficient funds are available in the account on which the instrument was drawn (i.e., a dishonoured cheque).
 5. All freight charges must be paid before any claims can be acknowledged. Claims cannot be deducted from accounts receivable.
 6. The Applicant agrees that this account application and any subsequent Contract of Carriage entered into between Fastfrate and the Applicant will be governed by or interpreted in accordance with the laws of the Province of Ontario and the Applicant further agrees that the Courts of Ontario are to have jurisdiction over legal proceedings.
 7. Failure on the part of the Applicant to comply with Fastfrate terms and conditions will result in the suspension or withdrawal of the Applicant's credit privileges.

By Signing below, I/We acknowledge that I/We have read and fully understand this agreement and all terms and conditions listed. I/We confirm that all the information is true and accurate.

Signing Officer

Name: _____

Title: _____

Signature: _____ Date: _____

Fastfrate Sales Representative: _____

FASTFRATE APPROVAL

APPROVED MONTHLY CREDIT LIMIT \$ _____

Signature: _____ Date: _____

Submit Form to Fastfrate

Reset Form

Please note:

If you are using an internet email client such as Yahoo mail or Gmail, or experiencing difficulty with the “Submit form to Fastfrate” button working properly, please save the completed application to your computer and manually send the pdf to credit@fastfrate.com

If you are experiencing difficulty filling in the form, please right click inside the form and save to your computer. Open form in acrobat reader and try again. If you do not have Acrobat Reader, you can [download it here](#).