

WORLD WIDE CARRIERS LTD.

Serving North America

Credit Agreement	(Please Print clearly)	Date _____
Legal Name _____		
Trade Name _____		
Address: _____	City: _____	
Province: _____	Postal Code: _____	Phone: _____
Accounts Payable Contact: _____		Phone: _____
Type of Firm: Proprietorship/ Partnership/ Corporation		
Name of Principles _____	Title _____	
	Title _____	
Social Insurance Number _____	or Business # _____	
Type of Business _____	# of Years in Business _____	
P.S.T. Exempt # _____	Number of Trucks _____	
Bank Name _____	Account No. _____	
Bank Address _____		
Bank Phone # / Contact _____ / _____	Fax No. _____	
Trade References:		
Name _____	Phone _____	
Address _____	Contact _____	
Name _____	Phone _____	
Address _____	Contact _____	
Name _____	Phone _____	
Address _____	Contact _____	
Consent: I authorize World Wide Carriers Ltd. to obtain/ exchange credit or other information as may be deemed necessary to establish and maintain accredit account and agree that World Wide Carriers Ltd may keep this info in their Database. Accounts not paid within agreed period of time would be past due and cause interruption in credit extended and all collection or legal fees incurred by World Wide Carriers Ltd would be on my/our account.		
_____ Signature of Authorized Officer	_____ Title	_____ Date