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905-625-1745

www.aaaexpressonline.com

Credit Application

Please email completed form to info@aaaexpressonline.com

Company Name _____

Address _____

City _____ Province _____ Postal Code _____

Contact _____ Phone # _____

Business Industry _____ How long has your company been in business? _____ years

Credit requested: _____

Accounts Payable Department:

Contact _____ Phone # _____

Email address _____

Shipping Dept:

Contact _____ Phone # _____

Email address _____

Bank Information:

Bank _____ Account # _____

Address _____

Contact name/phone/email _____

References:

1. Company name _____

Contact name/email address _____

2. Company name _____

Contact name/email address _____

3. Company name _____

Contact name/email address _____

*By signing this agreement, you provide authorization for AAA Express to contact your trade references as a part of our approval process. In addition, you acknowledge that our payment terms are Net 15 days, and that you have reviewed and acknowledge our Terms & Conditions (<https://aaaexpressonline.com/terms-and-conditions/>).

Name printed _____

Title _____

Signature _____

Date _____