

Please Fax Completed Application to : 905.848.3211

Company Name	
Address	
City / State / Province	Phone
Zip / Postal Code	Fax
Billing Address if Different From Above	
US Customs Broker	Canadian Customs Broker

COMPANY PROFILE

BANK INFORMATION

Company Type (Incorporated, Partnership, Proprietorship)	Name of Institution
Owner / Partners Name & Title	Address
Years in Business / Incorporation Date	City / State / Province
Accounts Payable Contact	Contact Name
Order Booking Contact	Phone
Credit Line Requested	Account Number

TRADE REFERENCES (NO CARRIERS OR BROKERS PLEASE)

Company Name		Company Name	
City / State / Province		City / State / Province	
Phone	Fax	Phone	Fax
Company Name		Company Name	
City / State / Province		City / State / Province	
Phone	Fax	Phone	Fax