

BILL TO INFORMATION (*required)

*Legal Business Name		*Company Contact	
*Operating/Trade Name			
*Address		Website	
*State/Prov		*City	
*Telephone		*Postal Code/Zip	
*Mailing Address (if different)		ICC/MC#	
Toll Free #		Business #	
*GST/HST Exempt	Y N	*Freight Broker	Y N
*Years in Business		*List owners:	
*Name		*Title	
*Name		*Title	
*Type of Business			

CONTACT INFO

*Accounts Payable	*Email
*Dispatch / General Manager	*Email

ACCOUNT SERVICES

*Credit Limit Requested	ORA Sales Rep
Electronic Invoicing contact	*Email

BANKING INFORMATION

*Name of Bank	*Transit & Account #
*Address	
*Postal Code	*Telephone

CREDIT REFERENCES

*Company #1	Contact Person
Telephone	*Email
*Company #2	Contact Person
Telephone	*Email
*Company #3	Contact Person
Telephone	*Email

*Name & Title	*Date
*Signature	

I (we) understand that freight bills are due and payable within 30 days from the billing date and agree that payment of freight or miscellaneous charges will not be reduced or withheld because of claims against the carrier. Interest will be charged on account balances over 30 days at a rate of 2% a month. In connection with my application for credit, I (we) hereby consent that a credit investigation be conducted.