



Credit Application for Dedicated Account

Please complete the following credit application, signed, and return to:
accounting@vancouvercrossdock.com

Company Name _____

Billing Address

Default Shipping Address
(If not same as Billing Address)

Main Phone# _____

Default Shipping# _____

Accounts Payable Contact _____

Ext# _____

Email for Invoicing _____

Email for Statements _____

Principals(s) _____

Credit Limit Requested: _____

Payment Option *(check one)* Direct Deposit Credit Card Online Banking

Credit Card# _____ Expiry Date _____ CVV _____

Address: _____

Name on Card

Cardholder Signature

Terms Requested: 5 days 10 days 15 days 20 days 30 days

I, _____ have reviewed and acknowledge the terms and conditions as outlined by VCD SUPPLY CHAIN SOLUTIONS INC.

Signature

Date _____



Trade References

Please supply an account number if necessary

1 Company Name _____ Account# _____
Address _____
Contact _____
Phone# _____ Fax# _____
Email _____

2 Company Name _____ Account# _____
Address _____
Contact _____
Phone# _____ Fax# _____
Email _____

3 Company Name _____ Account# _____
Address _____
Contact _____
Phone# _____ Fax# _____
Email _____

Please ensure all fields are completed to avoid delays in application process. If you have any questions, please contact the finance department at: accounting@vancouvercrossdock.com



Terms and Conditions

By signing the above cardholder agrees to the following:

1. All amounts are payable to VCD SUPPLY CHAIN SOLUTIONS INC.
2. Delivery of this authorization to VCD SUPPLY CHAIN SOLUTIONS INC. is the same as delivery to the financial institution of the above signed. The authorization directs the financial institution to pay as indicated and to charge the amount specified to the account of the above signed.
3. This authorization for Pre-Authorized payments may be cancelled at any time upon receipt of written notice. Cancellation of this authorization does not release the account holder from liability of payment due.
4. Disputed debits must be presented to your financial institution within 10 days of the debit date.
5. If more than one signature is required on a cheque issued against a joint account, all persons must sign above.
6. It is the customer's responsibility to ensure that the credit card information provided to VCD SUPPLY CHAIN SOLUTIONS INC. is up to date and accurate. Should your credit card expire during your tenure in the Pre- Authorized Credit Card program, you must notify VCD SUPPLY CHAIN SOLUTIONS INC. of this change for your account to remain in good standing.