



GTS - Gateway Transport
Solutions Inc.

186 - 8120 No. 2 Road, Box 736
Richmond, British Columbia
Canada V7C 5J8

Ph: 1-866-758-6507
Fx: 1-866-758-9915

Credit Application

(please complete and return)

Legal Business Name: _____ Trade Name(s): _____
Physical Address: _____
(City, Province/State, Postal/Zip Code)
Mailing Address: _____
(City, Province/State, Postal/Zip Code)
Other if applicable (i.e Ship To address): _____

Year Established: _____ Business Tel () _____ Fax: () _____
General email: _____ Website Address: _____
Business Type: Corporation Proprietorship Partnership Other
Is your company listed with Dun & Bradstreet? Yes No If yes, D&B #: _____

Nature of Business: _____
Types of products and estimated volume of imports/exports: _____
(attach descriptive literature, rulings, HS tariff information if available)

GST Number: _____ Have you registered for a CRA Import/Export Account? Yes No
If yes, CRA Business Number (9 digits): _____ RM _____ (i.e. 0001)

Contact information for import/export: _____ Email: _____
Accounts Payable Contact: _____ Email: _____

Special Instructions: _____

What is your MONTHLY import/export volumes in dollars: \$ _____

Principals, Officers, Partners and/or Owners:

Name _____ Title _____
Address _____ Tel () _____

Name _____ Title _____
Address _____ Tel () _____

Name _____ Title _____
Address _____ Tel () _____



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Bank Reference:

Bank Name _____
Contact Person _____
Address _____
Tel _____ Fax _____
Account Numbers (specify CAD and US) _____

Trade References:

These are suppliers that presently extend credit to you. Local references preferred. Three required.

Company _____ Contact Person _____
Address _____ Fax _____

Company _____ Contact Person _____
Address _____ Fax _____

Company _____ Contact Person _____
Address _____ Fax _____

Credit Agreement

The undersigned ("Customer") has provided the foregoing information, intended to be true and correct, to GTS-Gateway Transport Solutions Inc.. for the purpose of obtaining credit from GTS-Gateway Transport Solutions Inc.. and/or its associated companies, successors and assigns. In this connection, the Customer hereby authorizes and requests each bank or trade reference listed herein to advise GTS-Gateway Transport Solutions Inc.. or its agent of its credit experience with Customer and to express an opinion with respect to same. Further, Customer agrees that GTS-Gateway Transport Solutions Inc. may obtain personal credit reports with respect to its principals, officers, partners and/or owners. Customer acknowledges that GTS-Gateway Transport Solutions Inc. will, at its sole discretion, grant or deny credit with respect to any transaction and establish the terms and conditions under which credit may be granted. If credit is extended, Customer agrees to pay invoices in accordance with the terms and conditions set out by GTS-Gateway Transport Solutions Inc. and further agrees to pay any and all costs of collection.

All business is conducted in accordance with the Standard Trading Conditions adopted by the Canadian International Freight Forwarders Association Inc. and/or the Canadian Society of Customs Brokers. Copy available upon request or on the web at www.ciffa.com or www.cscb.ca.

TERMS: I (We) understand that all invoices are payable within 15 days of the invoice date.

Signed this _____ day of _____, 20 ____ at _____.

By: _____
(Signature) (Title)

(Print Name)

(Company)

All transactions are subject to the standard terms and conditions of the Canadian Society of Customs Brokers.