



Transport Lac Express(USA) Inc.

Authorization of Credit Information

I, _____ from (company name) _____, hereby accept and consent that *Transport LacExpress(USA)Inc.* will investigate and verify all information regarding the reputation and credibility of my company as required for the process of my credit approval.

Therefore I authorize any credit agency, financial institution, company or employee working within any such company to disclose this information.

Signed at: _____ dated: _____
(time)

Place: _____
(City, province or state, country)

Signature: _____
(Last and first name)

Transport Lac Express (USA) Inc.
900 rue Selkirk Pointe-Claire (Québec) H9R 3S3
Tel. (514) 694-0095 / 1-800-463-3939 – Fax (514) 694-7022



CREDIT INFORMATION / INFORMATIONS DE CRÉDIT

Company name:
Nom de compagnie: _____

Address/Adresse: _____

City/Ville: _____ **Province:** _____ **Zip Code/Code postal:** _____

Tel./Tél.: _____ **Fax/Télécopieur:** _____

President/Président: _____ **Vice President/Vice-Président:** _____

Secretary/Secrétaire: _____

Structure: Corp./corporation: Assoc./association: Ownership/propriétaire unique:

Business/Type d'entreprise: _____

Years in Business / **Nombre d'années en opération:** _____ **Accounts Payable Contact:** _____
Contact au compte à payer: _____

Annual Sales/Ventes annuelles: _____ **IRS#:** _____

GST#/TPS#: _____ **PST#/TVQ#:** _____

Bank/Banque: _____ **Account#/ No.de compte:** _____ **# de transit :** _____
Address/Adresse: _____ **Contact:** _____ **Tel./Tél.:** _____
 _____ **Fax :** _____

References: Références:	Name of the Company Nom de la compagnie	Telephone	Fax
		PAS de numéros 800 – NO 800	
1.			
2.			
3.			
4.			

NOTE : A copy of your exemption or resale certificate(s) for each U.S. state into which we will be shipping lumber to you must accompany your application.

Our Terms are:/Nos Termes De Ventes Sont: _____ ADF (After Deducting Freight)

Signature: _____

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