

# Application For Credit

CONFIDENTIAL



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<b>BILLING INFORMATION</b> If affiliate/subsidiary, indicate Parent Company			
Registered Business Name:			
Doing Business As(DBA): if the same as above indicate "same"			
Invoicing/Billing Address:			
City:	Province/State:	Postal/Zip Code:	
Principals (Partners/Owners/Officers) Name:		Title:	
Phone/Ext:	Mobile:	Fax:	
Controller/A/P Contact:	Phone/Ext:	Fax:	
BIN No. (Canada):		FED ID No/IRS No. (USA):	
Dunn & Bradstreet:		Business Established (month/year):	
Sole proprietorship:	Partnership:	Corporation:	Other:
Special Billing Instructions:		Requested credit limit:	

<b>BUSINESS/TRADE REFERENCES</b>			
Company Name:			
Phone:	Fax:	Email:	
Company Name:			
Phone:	Fax:	Email:	
Company Name:			
Phone:	Fax:	Email:	

<b>BUSINESS BANKING INFORMATION</b>			
Name of Bank:			
Address:			
City:	Province/State:	Postal/Zip Code:	
Contact:	Phone:	Fax:	
Branch, Institution No./Routing No:		Account No:	

<b>CREDIT CARD AUTHORIZATION</b> (optional) I/We, authorize Worldpak to charge my/our VISA/Master Card/American Express for any outstanding debts or purchases that I/We/customer/applicant may make.			
VISA/MC/AMEX #:		Expiry Date:	
Name on Credit Card:		Signature:	

<b>OFFICE USE ONLY</b>				
Customer code:	Approved by:	Date:	Credit Limit:	Rep:

**Just a bit more information to serve you better...If your shipping/receiving address is the same as above just indicate "same" in the first field below.**

**SHIPPING/RECEIVING ADDRESS:**

Address:	City:	Province/State:
Postal/Zip Code:	Phone/Ext:	Mobile:
Fax:	Primary Email:	
Primary Business Contact:		
Hours of Operation from:	Hours To:	Primary Commodity:
Special Instructions: ( i.e. "call 24 hours in advance", "no dock tailgate req'd")		
Appointment Required?	Requested Equipment: (i.e. forklift, tailgate, 5 ton etc.)	
Shipping/Receiving Contact Name	Phone:	
Fax:	Email:	
Canadian Customs Broker:	U.S. Customs Broker:	
Tel:	Tel:	
Fax:	Fax:	

Worldpak terms are full payment within 30 days of the date of the invoice.

**UNDERSIGNED APPLICANT AGREEMENT**

- I/We agree to pay all Worldpak invoices in full in consideration of extended credit per Worldpak's terms
- I/We understand and agree to pay any/all costs including 2%per month compounded monthly, on any overdue balance until paid.
- I/We understand and agree to pay all legal and collection fees in addition to the amount owed plus the interest charges.
- I/We have read and agreed to abide by Worldpak's terms & conditions listed on the purchase order.
- I/We consent to the obtaining of bank/credit information as may be required at any time in connection with the credit hereby applied for or renewal or extension thereof and to the disclosure of credit information concerning me/us and or my/our company to any credit reporting agency or to any person with the undersigned who has or purports to have financial relations.
- I/We hereby certify that the information contained in this application is true and correct.

Name(print):	Name(print):
Title:	Title:
Signature:	Signature:

**AUTHORIZED OFFICER(S)**

Worldpak Flexible Packaging, LLC  
 Reno, NV 89512  
 T(775)-359-0733 F(775)-359-0711