

For credit approval, please fax to:  
 Maxim Truck & Trailer  
 1860 Brookside Blvd, Winnipeg, MB R3C 2E6  
 Fax: 204 697-4231  
 Attn: Credit Department



## CREDIT APPLICATION

### Owner Information

|                                      |       |               |             |
|--------------------------------------|-------|---------------|-------------|
| Full Name (including middle initial) | Title | Birth Date:   | S.I.N #     |
| Home Address                         | City  | Province      | Postal Code |
| Phone#                               | Cell# | Email Address |             |

### Company Information

|                                |   |               |
|--------------------------------|---|---------------|
| Company Name (Full Legal Name) | Phone #   | Fax #         |
| Billing Address                | City  | Province      |
| Year Business Was Established  | PST # (provide copy of PST license or CAB card/s) | Email Address |

### Employment Information

|                                       |  |          |             |                      |
|---------------------------------------|--|----------|-------------|----------------------|
| Name of Current Employer: (check one) | Owner/Operator                         | Driver   | Other       | Monthly Gross Salary |
| Employer Address                      | City                                   | Province | Postal Code |                      |
| How many years with current employer? | Previous employer if less than 1 year: |          |             |                      |

### Banking Information

|   |                |             |
|---|----------------|-------------|
| Bank Name   | Account Number | Branch      |
| Address   | City           | Province    |
| Phone #   | Fax#           | Postal Code |
| Have you or your company/employer ever been bankrupt?                 | Yes            | No          |
| Are company financial statements available (required for all leases)? | Yes            | No          |

### Supplier References (Please provide three)

|              |        |       |
|--------------|--------|-------|
| Company Name | Phone# | Fax # |
| Company Name | Phone# | Fax # |
| Company Name | Phone# | Fax # |

### Credit Request Information

|  |  |                                     |  |
|--|--|-------------------------------------|--|
| Type of Credit Request: (Check all that apply)   | Parts  | Service                             | Rental and/or Lease                      |
| Maxim Branch Accounts:<br>(Check all that apply) | Wpg Trucks<br>Wpg Used Parts<br>Calgary            | Wpg Trailers<br>Brandon<br>Edmonton | Wpg Lowson Cres<br>Saskatoon<br>Montreal |
| Amount of Credit Required: \$                    | Do You Require a Statement?                        | Y <sup>Email</sup><br>Address       | N Are P/Os Required? Y N                 |
| Accounts Payable Contact:                        | Name of Representative Authorized to Make Changes: |                                     |  |

I understand that a consumer report containing credit and personal information about me may be obtained from a consumer reporting agency in connection with this application. I agree to Maxim Truck & Trailer obtaining such a report and authorize the company to investigate and secure additional information about me and or my company to other credit reporting agencies. I hereby authorize Maxim Truck & Trailer to obtain such credit information deemed necessary including banking information. I hereby make application for account privileges for my normal monthly purchases with the understanding that all charges for parts and service work are due 30 days from the invoice date. If not paid within 30 days, account privileges may be withdrawn and interest charged on the past due balance at the rate of 2.33% per month and 28% per annum will be charged to my account. All lease accounts are subject to lease contract terms. I agree to pay any collection costs incurred to collect the account balance, including reasonable attorney fees. Any legal action will take place in and under the laws of Manitoba. Maxim Truck & Trailer can cancel this charge account at any time without notice. I have read the terms and conditions stated above and agree to all of these terms and conditions.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Maxim Sales Representative: \_\_\_\_\_ Maxim Branch: \_\_\_\_\_