

Hogg Group of Companies -- Credit Application

Tel: 519-579-5330 Fax: 519-579-2531

Hogg Fuel & Supply Limited
PO BOX 65, KITCHENER N2G 3X4

Transit Lubricants Ltd.
PO BOX 1720, KITCHENER N2G 4R3

Triag Stone Company Ltd.
PO BOX 1719, KITCHENER N2G 4R3

Transit TM PO BOX 1720, KITCHENER N2G 4R3

Invoice to:

Company Name: _____

Delivery Location/Ship to: _____

Legal Name: _____

Address: _____

Type of Business: _____

City: _____ Postal Code: _____

Year Established: _____

Business Type: Corporation () Partnership () Proprietorship ()

Web Site: _____

Payables Contact: _____	Email: _____
Phone #: _____ Ext. _____	Fax: _____

Names of Principal (s), Partner(s) or Proprietors

NAME: _____	S.I.N./Birth date: _____
Home Address: _____ City _____	Phone: _____
NAME: _____	S.I.N./Birth date: _____
Home Address: _____ City _____	Phone: _____

We authorize the bank listed to release the requested information for the purpose of obtaining an open line of credit.			
Bank: _____	Contact: _____		
Address: _____	Telephone: _____	Fax: _____	
City: _____	Account #: _____		

Trade References Name:	Address/City	Telephone/Fax
_____	_____	_____
_____	_____	_____
_____	_____	_____

Previous Suppliers: _____

Credit Card # _____ / _____ / _____ / _____ VVN # _____ Expiry Date: ____/____

PAYMENT OPTION: () PAYMENT DUE WITHIN 15 DAYS OF INVOICE OR DELIVERY DATE.

() PAYMENT DUE WITHIN 30 DAYS OF INVOICE OR DELIVERY DATE upon receipt of completed and signed Pre-Authorized Payment form (authorized signing officer of business).

The undersigned authorizes you to obtain from or disclose any information pertaining to the credit standing of the company or related affiliations or principals and further authorizes the right of offset against any accounts due from your related companies. The undersigned authorizes you to charge outstanding balance to the above noted credit card if not paid within specified terms and/or as requested by the client. Accounts not paid by due date are subject to an interest charge from date of maturity at the rate of 1.5% per month (19.56% per annum) as shown on invoices. The Hogg Group of Companies reserves the right to change credit terms and payment option.

Client Signature: _____
Authorized Signing Officer

Date: _____

Client Name (print): _____

Credit Line desired: \$ _____

Title: _____

Please refer to and initial the Terms and Conditions on Page 2

Conditions

1. Agents or representatives of credit grantor are not authorized to change or adjust credit terms without written authorization of the Credit Manager, CEO or President.
2. Accounts not paid by due date are subject to an interest charge from due date at the rate of 1.5% per month (19.56% per annum) as shown on invoices.
3. All claims against invoices must be made within 30 days after receipt of goods. Goods may not be returned without prior authorization of (credit grantor).
4. Goods/merchandise authorized for return will be subject to a minimum 15% restocking charge.
5. Copies of lost or misplaced invoices provided to applicant will be subject to a \$20.00 charge.
6. NSF cheques will be subject to a \$ 25.00 charge.
7. Failure to comply with these Terms and Conditions may result in cancellation of credit privileges without notice. In the event of any default, the (credit grantor) may (a) close the account and/or (b) accelerate payment of the full balance (c) assign the account to an agent or other authorized representative for collection.
8. Applicant agrees to bear all costs incurred in collecting any unpaid amounts including but not limited to collection suit fees, legal fees and court costs.
9. The information given in this Application and agreement is warranted to be true and correct and given for the purpose of obtaining credit.
10. The applicant consents to the obtaining of credit and/or personal information as may be required in connection with the credit line hereby applied for or any renewal or extension thereof and to the disclosure of any trade information concerning the applicant to any credit reporting agency or to any person with whom the applicant has or proposes to have financial relations.
11. Upon determination that the customer's creditworthiness has changed adversely or does not satisfy current credit standards, (credit grantor) may close or lower the credit limit of the account.

Client's Initials

OFFICE USE ONLY:

COMPANY NAME: _____		Existing: Y () N ()	
Ready Mix : # _____	Projected Volumes: Monthly () Yearly ()	m3 _____	Dollars: \$ _____
Stone: # _____	Projected Volumes: Monthly () Yearly ()	m3 _____	Dollars: \$ _____
Lubricants : _____	Destination Code _____	R () J () W ()	
	Projected Volumes: Monthly () Yearly ()	liters: _____	Dollars: \$ _____
FMS: # _____	Unleaded () Clear ()	Marked ()	Premium Unleaded ()
	Projected Volumes: Monthly () Yearly ()	liters: _____	Dollars: \$ _____
Fuel Delivery: # _____	Clear () Marked ()	Unleaded ()	Premium Unleaded ()
	Normal () Call ()	Automatic ()	Furnace Oil ()
	Projected Volumes: Monthly () Yearly ()	liters: _____	Dollars: \$ _____
Mechanical: # _____			
Furnace Oil Only: # & Tank Size _____x_____	Fill Location _____	Oil in Tank _____	
Oil Hot Water Heater (yes) (no)	Fill Required (yes) (no)	Yearly litres _____	
Normal () Call ()	Automatic ()	Inspection # _____	
Remarks/ Delivery Notes: _____			
Office/Credit Dept:			
Salesman # _____	CI: _____	PI: _____	RCODE: _____
Collector # _____	Auth: _____	_____	LIMIT: \$ _____
	Analyst	Cr. Manager	Daily Vol. Limit \$ _____