



NEW ACCOUNT CREDIT APPLICATION FORM

36 Coverton Close NE Calgary, AB T3K4P3 (403) 5854349 info@premiumlimousine.ca

LEGAL COMPANY NAME: _____

TRADE NAME: _____

ADDRESS: _____

TEL: () _____ FAX: () _____

EMAIL: _____

BILLING ADDRESS _____

CONTACT PERSON _____

YEARS IN BUSINESS _____

BILLING EMAIL ADDRESS: _____

CREDIT REFERENCES:

1. _____

2. _____

3. _____

BANK NAME _____

By accepting "Premium Private Transportation Ltd" credit account and signing below, the credit holder agrees to abide by the provisions, terms and conditions set forth herein:

- Credit holder shall pay to Checker Transportation Group for all services charged to his/her/company's account when account becomes due and payable.
- Any change of name or address or other particular changes must be reported to Checker Transportation Group immediately.

By signing below the undersigned accepts as notice in writing of, and consents to, the obtaining from any credit reporting agency or any credit grantor such information Checker Cabs Ltd. may require at any time in connection with the credit hereby applied for and consents to the disclosure at any time of any information concerning the undersigned to terms and conditions of the Checker card holders agreement.

Signing Authorization (please print):

Signature: _____

Title: _____ Date: _____

Premium Private Transportation Ltd.