



**Western  
Logistics**

## **CREDIT APPLICATION**

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**COMPANY NAME**

**APPLICATION DATE**

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**BILLING ADDRESS**

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**CITY**

**PROVINCE/STATE**

**POSTAL CODE/ZIP**

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**TELEPHONE**

**FAX**

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**YEARS IN OPERATION**

---

**BILLING CONTACT NAME**

**BILLING TITLE**

**BILLING EMAIL**

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**SHIPPING / RECEIVING ADDRESS (IF DIFFERENT FROM ABOVE)**

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**SHIPPER / RECEIVER CONTACT NAME**

**SHIPPER / RECEIVER EMAIL**

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**SHIPPER / RECEIVER TELEPHONE**

**SHIPPER / RECEIVER FAX**

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**SPECIAL INSTRUCTIONS / REQUIREMENTS**

**TRADE REFERENCES (3 REQUIRED):**

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**COMPANY NAME**

**CREDIT LIMIT**

**TELEPHONE**

**FAX OR EMAIL**

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**COMPANY NAME**

**CREDIT LIMIT**

**TELEPHONE**

**FAX OR EMAIL**

---

**COMPANY NAME**

**CREDIT LIMIT**

**TELEPHONE**

**FAX OR EMAIL**

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**CUSTOMER SIGNATURE**

**WESTERN LOGISTICS SIGNATURE**