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Doc No: 1001	<b>CUSTOMER CREDIT APPLICATION</b>	
<p><b>CONFIDENTIAL INFORMATION</b></p> <p>Legal Name of Company _____ Corp _____ Proprietorship _____ Partnership _____ Division _____</p> <p>Street Address: _____ Year Established _____ Annual Sales \$ _____</p> <p>City, Province, Postal Code _____ Nature of Business _____</p> <p>Telephone _____ Fax _____ No. of Employees _____</p> <p>Billing Address (if different from above) _____</p> <p>PST Exemption # _____</p> <p> <input type="checkbox"/> Net 30 Day Terms                              <input type="checkbox"/> Credit Requested \$ _____                              <input type="checkbox"/> Purchase Order Required       </p>		
<b>OWNERSHIP</b>		
Name and Title:	Phone#:	
Address:		
Name and Title:	Phone#:	
Address:		
<b>ACCOUNTS PAYABLE</b>		
Name:	Phone#:	
Email:	Fax:	
<b>TRADE REFERENCES</b>		
Name:	Fax#:	Phone#
Address:		
Name:	Fax#:	Phone#
Address:		
Name:	Fax#:	Phone#
Address:		
Name:	Fax#:	Phone#
Address:		
<b>BANK REFERENCE</b>		
Name:	Acct#:	Phone#:
Address:		Fax#:
<p>ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE. WE AUTHORIZE TERECK DIESEL LTD. TO MAKE ANY AND ALL INQUIRIES NECESSARY FOR ACTION ON THIS CREDIT APPLICATION. WE HEREBY INDEMNIFY TERECK DIESEL LTD. AND ITS AGENTS, FROM AND LIABILITY</p> <p>Authorized Signature: _____ Name &amp; Title (Print): _____</p> <p style="text-align: center;"><b>Complete this order form and fax to: 204-654-9676</b>  <b>Form can be emailed to <a href="mailto:parts@tereckdiesel.com">parts@tereckdiesel.com</a></b></p>		