



For WCI Use Only:

Salesperson _____
District _____
Date _____
Credit Approval _____
Customer Number _____

CREDIT APPLICATION & AGREEMENT

Customer Name _____ Credit Line Requested _____
Address _____ City _____ State _____ Zip _____
Billing Name (if different) _____
Billing Address (if different) _____ City _____ State _____ Zip _____
Phone Number (_____) _____ Fax Number (_____) _____
Accounts Payable Contact _____
Special Billing Requirements _____

____ Partnership
____ Corporation
____ Individual: SSN _____
____ Financial Statement Attached? _____
DUNS # _____
Type of Business _____
Do you operate under another name? _____
If yes, please list _____

Owners (if applicant is a sole proprietor or partnership – list social security numbers) or Officers (if a corporation):

Name	Title	Address
SSN _____	_____	_____
SSN _____	_____	_____

Bank Reference:

Bank Name _____ Account Number _____
Address _____ Phone Number _____
Contact _____ Fax Number _____

List 3 Active Trade References:

Name	City, State	Telephone / Fax
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant authorizes Waste Connections, Inc. to obtain credit information about Applicant verbal or written, from the above named references. If credit is extended, Applicant agrees to pay for all services provided by Waste Connections, Inc at the rates specified. Payments shall be due according to terms. Applicant's payment obligations to Waste Connections, Inc. shall not be subject to the receipt of payment by applicant from any other party. In the event of non-payment or other violation of this Credit Application Agreement, Applicant will: 1. Pay 1% per month service charge on all past due amounts: 2. Pay all collection costs including reasonable attorney fees. Applicant represents that the person signing this credit application is expressly authorized to do so, that it is binding on applicant, and consents to legal action in any state in which Waste Connections, Inc. has offices and is conducting business. Applicant certifies and represents that all information provided to Waste Connections is true and correct, and that the applicant expressly intends Waste Connections, Inc. to rely upon it. Applicant grants permission to Waste Connections, Inc. to contact any or all references, trade and bank, at any time before or after extending credit to applicant, and that the bank(s) is authorized to disclose account numbers, changes in account numbers (including without limitation closing of any accounts), as well as account names, balances, and account histories. Waste Connections, Inc. agrees that all credit information will be kept confidential.

Customer's Signature _____ Date _____
Title _____