



Peace River Regional District Application for Credit

Before consideration may be given to the extension of credit, the attached confidential credit application must be completed in full and submitted to the Peace River Regional District (PRRD) Finance Department, P.O. Box 810, Dawson Creek, BC, V1G 4H8 or **Faxed to (250)784-3229**.

Please ensure that the application is completed in full:

1. **Commercial Credit references** – name, address, telephone and fax number of three recent commercial suppliers who have extended credit to your company.
2. **Acceptance of PRRD terms of credit** – endorsement by applicant.
3. **Completion of personal guarantee** – endorsement by an officer of the company.
4. Ensure licence plates of vehicles hauling on your behalf are listed on the application.
5. If your company is registered in Alberta or any province other than British Columbia, please provide a copy of your company's **Certificate of Registration** and/or **Director Information** showing the names of the authorized signing officers in the company.

Completed applications will be processed and written notification of credit approval will be forwarded to the address supplied on page 1 of the application. The normal processing time for credit application is 1-2 weeks.

Applications which do not have the items listed above will NOT be processed.

If you require immediate notification of credit approval via fax or email please indicate in the appropriate space below:

YES NO

If yes, please provide applicable fax # or email address: _____

If you have any inquires please contact our Accounts Receivable Department:

Phone: (250)784-3200
Toll Free: (800)670-7773
Fax: (250)784-3229

Freedom of Information and Protection of Privacy

Personal information contained on this form is collected and will be used only for the purposes of processing this application and enforcing the terms of the credit agreement and personal guarantee.

Inquires about the collection or use of information on this form can be directed to the Freedom of Information and Protection of Privacy contact at (250)784-3200.

Peace River Regional District Commercial Solid Waste Application

I/WE MAKE APPLICATION for a credit account with the Peace River Regional District, and understand that if this application is approved it will constitute an agreement to pay for all invoices as rendered in accordance with standard credit terms: net 30 days from invoice date.

The submission of this application does not commit the Peace River Regional District to grant credit. If credit is granted, the Peace River Regional District reserves the right at any time to review credit accounts and change or cancel existing credit. Accounts inactive for more than two years will be closed.

Applicable landfill site(s): **Bessborough** **Chetwynd** **Fort St. John**

[Contact Name]	[Title]	[Email Address]	[Phone]
----------------	---------	-----------------	---------

[Legal Business Name]	[Trade Name]	[Fax]
-----------------------	--------------	-------

[Invoice Address]	[City]	[Province]	[Postal Code]
-------------------	--------	------------	---------------

[Business Address if different from above]	[City]	[Province]	[Business Phone]
--	--------	------------	------------------

[Nature of the Business]

[Type of waste i.e. wood, household, construction, concrete, etc.]

PRINCIPALS:

[Name]	[Title]	[Residential Address]
--------	---------	-----------------------

[Name]	[Title]	[Residential Address]
--------	---------	-----------------------

VEHICLES USED TO HAUL WASTE: (Required for landfill access)

[Colour]	[Year]	[Make/Model/Unit No.]	[Licence Plate]
----------	--------	-----------------------	-----------------

[Colour]	[Year]	[Make/Model/Unit No.]	[Licence Plate]
----------	--------	-----------------------	-----------------

[Colour]	[Year]	[Make/Model/Unit No.]	[Licence Plate]
----------	--------	-----------------------	-----------------

COMMERCIAL REFERENCES: (Minimum of 2)

- 1. _____ Phone: _____ Fax: _____
- 2. _____ Phone: _____ Fax: _____
- 3. _____ Phone: _____ Fax: _____

I am an officer/agent authorized to sign for the applicant company, and I have read and fully understand and accept the conditions of this application.

I hereby authorize the Peace River Regional District to obtain such credit information or reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement.

NAME: _____ SIGNATURE: _____ DATE: _____

Peace River Regional District Terms for Haulers Wishing to Establish Credit for Disposal of Refuse

The undersigned hereby expressly consents to the following terms and conditions of payment:

1. Payment in full shall be received by the Peace River Regional District within thirty (30) days of the invoice date. The Peace River Regional District will invoice monthly for refuse delivered during the preceding month. The invoice amount will be based on the total quantity of refuse delivered during the month, and the posted disposal rates in effect at the time of delivery.
2. Late payment(s) will be subject to:
 - 30 to 60 days: account holder will be notified via their statement that payment must be received prior to their account becoming 60 days overdue.
 - Over 60 days: account will be placed on hold as “cash on delivery” (COD) to all Peace River Regional District landfills until the account is paid in full.
 - Accounts on hold for more that 60 days will be forwarded to a collection agency for collection.
3. The Peace River Regional District reserves the right to restrict access to all area landfills and to cancel the credit offered herein for late payment, non-payment or other justified cause as judged solely by the Peace River Regional District.
4. The undersigned hereby expressly consents to the Peace River Regional District, or an agent thereof obtaining such reports containing credit or personal information regarding the undersigned from the undersigned's present suppliers, past, present or any future employer or from any other person or agency as the Peace River Regional District or its agent may from time to time see fit in connection with this application. This consent is given pursuant to the laws of British Columbia. *Please provide Credit References in the space provided on the form.*

I/We _____ hereby accept the terms of credit on
[Signing officer of company or owner – please print]
behalf of _____.
[Business or Company Name]

x _____
[Signature of Signing Officer/Company Owner]

PERSONAL GUARANTEE

In consideration of the Peace River Regional District extending credit to the business or company, in which I have a financial interest, known as _____, under the terms set out above, I hereby agree to pay to the Peace River Regional District upon their demand any monies, including interest owing thereon, owed by the business or company to the Peace River Regional District, as a result of the extending of such credit, and that has not been paid by the business or company when due.

1: _____ x _____
[Officer's Name & Title - please print] [Signature]

2: _____ x _____
[Officer's Name & Title – please print] [Signature]

For Office Use Only

Credit Check by: _____ Date: _____

Approved by: _____ Date: _____

Not Approved: _____ Account Number: _____

Activation Date: _____