



31 Alexander Rd.  
Newmarket, ON  
L3Y 3J2

## Pre Authorized Payment Plan

### No time to schedule payments?

Join now for our convenient Pre-Authorized Payments, and let us do the work for you!

Fill out the information below and we will automatically debit your account when your payment is due.

I / We authorize A&B Courier Services Ltd. To debit my/our bank/trust account for payments due by the undersigned to A&B Courier Services Ltd. in payment of my/our courier bills. The under noted financial institution is hereby authorized to debit the designated account of the undersigned. I/We ensure that the funds will be available to cover the withdrawal and that insufficient funds will result in service charges as applicable, and possible cancellation of my/our enrollment in the payment plan.

**This authorization may be canceled at any time upon written notice.**

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Name of Financial Institution

---

Branch Address

---

Bank Account Number (requires chequing privileges)

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A&B Courier Account Number

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Date

---

Signature(s) if joint account

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Signature(s) if joint account

Invoices issued on the 15th of the month will be withdrawn on the 7th of the following month.

Invoices issued on the 30th of the month will be withdrawn on the 21st of the following month.

*“Where you go...  
we go”<sup>®</sup>*

Fax: (905) 853-5565

E-Mail: [order@abcourier.com](mailto:order@abcourier.com)

[www.abcourier.com](http://www.abcourier.com)

York Region

Toronto

905-853-4444

905-881-9444



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CREDIT APPLICATION

COMPANY NAME \_\_\_\_\_

BILLING ADDRESS:

DEFAULT SHIPPING ADDRESS:  
(If not the same as Billing Address)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE # (\_\_\_\_\_) \_\_\_\_\_

FAX # (\_\_\_\_\_) \_\_\_\_\_

ACCOUNTS PAYABLE CONTACT \_\_\_\_\_ EXT. \_\_\_\_\_

ACCOUNTING E-MAIL (EDI INVOICES) \_\_\_\_\_

PRINCIPAL(S) \_\_\_\_\_  
\_\_\_\_\_

OPERATING SINCE \_\_\_\_\_  
REVENUE PER MONTH \_\_\_\_\_

PAYMENT OPTION (CHECK ONE)

- PRE-AUTHORIZED VISA/MASTERCARD
- DIRECT DEPOSIT
- CHEQUE

- PRE-AUTHORIZED DEBIT
- SELF DIRECTED CREDIT CARD

TERMS REQUESTED:

- 10 DAYS
  - 20 DAYS
  - 30 DAYS
  - 40 DAYS
  - 50 DAYS
  - 60 DAYS
- (Terms greater than 30 days require special approval)

I, \_\_\_\_\_ have reviewed and acknowledge the terms and conditions as outlined by A & B Courier Service Limited dated \_\_\_\_\_.

Signature \_\_\_\_\_

FAX BACK TO (905) 853-3415  
AB

