

### **CUSTOMER ACCOUNT CREATION (external use)**

Thank you for choosing Cargolution for your logistics needs.

Please read and complete the following information and return the document duly signed. Our Policy requires the first shipment to be paid before we accept custody of the goods.

Your credit limit will be confirmed once your account is opened.

Please allow up to 5 working days to process a credit application. Should a shipment need to move within less than 5 working days it will be processed as a COD transaction.

If you wish to open an account on a COD basis, please check the box below and fill this form except part 4. **YES** 

#### Part 1: Billing and communication preferences

To improve our services, we would like to know your requirements for billing and communication. Please clarify the following points.

Which language do you prefer your billing in: English French

To comply with anti-spam legislation and personal data regulations, we would like to ask whether you authorize us to send you occasional emails containing general information regarding the logistics industry, custom clearance or Cargolution news:

Yes: No:

#### **Part 2: General information**

Company name:								
Billing address:								
City:	Postal/Zip code:							
Office address: (☐ same as billing address)								
City:	ry: Postal/Zip code:							
Telephone:								
TAX ID: VAT ☐ GST number ☐ other Tax number ☐:								
Certification / Registration / Business / Corporation number:								
Company Type:								
Sole Proprietorship		Individual						
Partnership		Corporation						
Other		Please specify for other:						
Customer type :	Customer	□ Agent	☐ For agent, specify network:					
Date of creation:								



# Part 3: Banking information

Account number (Transit #, IBAN, SWIFT):									
Account currency:									
Financial institution:									
Bank Contact Officer:									
Bank address:									
Beneficiary:									
Beneficiary address:									
Part 4: Credit Application									
Contact person in Fi	inance / Accounts p	oayable departmer	nt:						
Name of the contact:									
Function:			1						
Email:			Telephone:						
Credit limit requeste									
Standard credit terms	•	ess otherwise negot	tiated wit	th the customer					
Other payment terms	requested:								
Credit references:	1	ı							
Supplier name:	Contact person:	Telephone:		Email:					
Supplier name:	Contact person:	Telephone:		Email:					
Supplier name:	Contact person:	Telephone:		Email:					



## Part 5: Insurance

Cargolution can provide insurance based on Cargo value (ad valorem insurance).  *Please note:									
<ul> <li>Insured value can be negotiated under certain conditions</li> <li>Packaging material such as containers, crates and road cases are not considered as insurable goods</li> <li>Should you accept our insurance you will receive a quotation for the related cost</li> </ul>									
We accept	the insurance coverage:  □ For every shipment sent with Cargolution								
	☐ On written demand only, case by case								
We <b>decline</b> the insurance offered by Cargolution and understand that Cargolution limitations of liabilities will apply in case of Cargo damages □  *Please note that if we do not receive your written instructions regarding the insurance of your shipment, Cargolution will assume that you are taking care of insuring your merchandise yourself.									
Part 6: Terms and conditions									
By signing this document, we declare that we have read the general conditions of sale as per CIFFA and accept them without condition.  Conditions available at <a href="https://ciffa.com/wp-content/uploads/2021/06/CIFFA-STCs-2021-English_Rebrand.pdf">https://ciffa.com/wp-content/uploads/2021/06/CIFFA-STCs-2021-English_Rebrand.pdf</a>									
Name:				Date:					
Signature:									

With this signed form, please attach the general liability certificate.