

CREDIT APPLICATION

Company Name: _____
Address: _____ Suite/Unit _____
City: _____ Province: _____
Postal Code: _____
Telephone: _____ Facsimile: _____
E-mail: _____ Website: _____

Please Check: Proprietorship Partnership Limited

Give full names and addresses of owners, partners, or officers.

Full name and address:	Full name and address:
_____	_____
_____	_____
_____	_____

Nature of Business: _____

Accounts Payable Clerk: _____

Financial Institution References: _____

_____ Phone: _____
_____ Fax: _____

PST NO: _____ GST NO: _____

Trade References 1 _____

_____ Phone: _____
_____ Fax: _____

Trade References 2 _____

_____ Phone: _____
_____ Fax: _____

Trade References 3 _____

_____ Phone: _____
_____ Fax: _____

The Undersigned agrees that the usual Credit Inquiries may be made at any time in conjunction with the credit hereby applied for and consents to the disclosure of such information to any person or to any credit reporting agency with whom the Undersigned has or may have financial relations. The Undersigned affirms that the information given herein is true and correct as of the date of signing.

Signature _____ Date: _____