

CREDIT APPLICATION

COMPANY NAME	TELEPHONE	FAX
BILLING ADDRESS		P.O. BOX
CITY	PROVINCE	POSTAL CODE
WEBSITE		

Full Name of Owner(s) or an Authorized Corporate Officer - List home address and postal code

LAST NAME	FIRST NAME	ADDRESS	TITLE

TYPE OF BUSINESS (PLEASE CHOOSE ONE)	INDIVIDUAL	BUSINESS	CORPORATION	SPOUSE'S NAME (INDIVIDUAL ONLY)
DATE STARTED	BUILDING: OWN		LEASE	
MORTGAGE HOLDER/LANDLORD	TELEPHONE			
ADDRESS OF LANDLORD/MORTGAGE HOLDER				

BANK REFERENCE

NAME OF BANK	ACCOUNT NUMBER
ADDRESS OF BANK	TELEPHONE
CITY	PROVINCE
	POSTAL CODE

TRADE REFERENCE

NAME	TELEPHONE
ADDRESS	FAX
NAME	TELEPHONE
ADDRESS	FAX
NAME	TELEPHONE
ADDRESS	FAX

COMPANY NAME	SIGNATURE OF OFFICER/PRINCIPAL
DATE	TITLE