

CREDIT APPLICATION

Date: _____



Toll Free Phone: (877) 378-0240

Toll Free Fax: (877) 378-0249

Company Name:	
Subsidiary of or Division of:	
Billing Address:	Shipping Address:
Phone #:	Fax #:
Years In Business: _____	Corp.: _____
Partnership: _____	Proprietorship: _____
Product: _____	Type of Business: _____
Amount to be purchased monthly:	
Company Officers:	
President:	Extension:
Vice President:	Extension:
Secretary or Controller:	Extension:
Accounts Payable:	Extension:
Bank:	
Branch:	Phone #:
Address:	
Chequing Account #:	
Bank Loan Account #:	
Officer of Account:	
Trade References:	
1)	Fax #:
2)	Fax #:
3)	Fax #:
4)	Fax #:
5)	Fax #:

Approved: _____

Signed: _____

Date: _____