



CONFIDENTIAL CREDIT APPLICATION

Company Name:		DBA, If Applicable	
Company Address:		Postal Code:	
Phone Number:		Fax Number:	
Year Started:		GST/EIN#	
AP Contact Name:		AP Phone Number:	
Billing Address: (If Different)		Postal Code:	
AP Email Address:		Address to Email Invoices:	
Company is:	() Proprietorship () Limited or () Subsidiary	Type of Business:	
Amount of Credit Requested:	\$ _____ / per month	Requested Terms:	() Net 10 () Net 30 () Other
Company Bank:		Phone Number:	
Bank Address:		Fax Number:	

Trade References

*****Minimum of 3 references are required! No Freight, Rental/Lease or Service companies are accepted!*****

1.Reference Name		Phone Number:	
Address:		Fax / Email:	
2.Reference Name		Phone Number:	
Address:		Fax / Email:	
3.Reference Name		Phone Number:	
Address:		Fax / Email:	

Name of Applicant:		Position:	
Date:		Signature:	