

CLIENT HISTORY FORM & CREDIT APPLICATION

ALL THE INFORMATION PROVIDED WILL BE REGARDED AND TREATED AS CONFIDENTIAL

Name of Sales Representative : _____

REQUESTED CREDIT : _____

1) COMPANY DESCRIPTION & APPLICANT INFORMATION

Company Name (Full) : _____

Company's Full Legal Name (if applicable) : _____ Number of Employees : _____

Address : _____ City : _____ Province : _____

Postal Code : _____ Telephone # : _____ Fax # : _____

Purchasing Manager : _____ e-mail : _____

Accounts Payable : _____ e-mail : _____

G.S.T. # : _____ P.S.T. # : _____

Type of entreprise : _____

(Please check off one of the boxes) Partnership ☐ Proprietorship ☐ Association ☐ Corporation ☐

2) COMPANY ADMINISTRATORS

Name : _____ Title : _____

Name : _____ Title : _____

Name : _____ Title : _____

Director : _____ Purchasing : _____ Accounts Payable : _____

3) BANKING INFORMATION & REFERENCES

Name of Bank : _____ Address : _____

Contact : _____ Telephone # : _____ Number of Years : _____

File or Account # : _____

CREDIT GRANTED (mark an X) : Low : _____ Medium : _____ High : _____ Amount : _____

4) PRINCIPAL SUPPLIER REFERENCES

NAME OF SUPPLIERS	ADDRESS	TELEPHONE/FAX #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

5) AUTHORIZATION OF CREDIT

- a) I understand and agree that I must pay all purchases charged to my account under the terms of payment specified in the account statement and/or invoices.
- b) I understand and agree that interest charges of 24% per annum, calculated monthly (2% per month) will be added on any past due amounts. I also understand that these interest charges do not release me from the obligation to pay for my purchases when they are due for payment.
- c) I understand and agree that my account-related privileges may be cancelled at any time, and at the discretion of your company.
- d) I understand that this is a credit application and in so doing, I authorize you to conduct surveys of my/our credit, either by direct communication or through credit bureaus. I declare that the information contained in this application is true and valid, and that I am an authorized signatory. I also understand that if this credit application is accepted, the applicant agrees to credit conditions as indicated in this agreement.

IN WITNESS WHEREOF, I (WE) HAVE SIGNED PLEASE,

Applicant : _____ Title : _____

Signature : _____ Date : _____