



CREDIT APPLICATION

7550 Lowland Drive, Burnaby, BC V5J 5A4
Tel: 604-439-9668 | Fax: 604-439-9666

BUSINESS INFORMATION:

(LEGAL) COMPANY NAME: _____

Is this Company Incorporated? (Checkmark): Yes No

REGISTERED DBA NAME: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

TELEPHONE: _____ FAX: _____

LINE OF BUSINESS: _____

HOW MANY YEARS IN BUSINESS: _____

ORGANIZATION TYPE (checkmark): Sole Proprietor, Corporation, Partnership, LLC

COMPANY PRINCIPALS/OFFICERS:

NAME: _____

TITLE: _____

ADDRESS: _____

TELEPHONE: _____

OWNERSHIP %: _____

ACCOUNTS PAYABLE CONTACT:

NAME: _____

TELEPHONE: _____ FAX: _____

TAX EXEMPT NO: _____

TRADE REFERENCES: *****FOUR REFERENCES REQUIRED*****

1) COMPANY NAME: _____ CONTACT: _____

TELEPHONE: _____ FAX: _____
(essential)

2) COMPANY NAME: _____ CONTACT: _____

TELEPHONE: _____ FAX: _____
(essential)



CREDIT APPLICATION

TRADE REFERENCES (Continued)

3) COMPANY NAME: _____ CONTACT: _____
TELEPHONE: _____ FAX: _____
(essential)

4) COMPANY NAME: _____ CONTACT: _____
TELEPHONE: _____ FAX: _____
(essential)

BANK REFERENCE:

BANK NAME: _____
ADDRESS: _____
CONTACT: _____
TELEPHONE: _____ EXTENSION: _____

DISCLOSURE OF INFORMATION AND GUARANTEE:

I/we have had unsatisfied judgments against me/us in the past 7 years and or been declared bankrupt in the past 10 years? **(yes/no)**

I/we are making an application for credit and certify that the information given for the purpose of opening this account is true. I/We authorize verification of the above facts.

I/we understand that invoices are payable within 30 days of the billing date and further agree that if there should be any invoices that remain past the due date, it could bear interest at the rate of 2% per month until paid. In the event that any suit or action is instituted to collect money due on our account, whether principal or interest, or both, I/we agree to pay, in addition to the amount owed, all costs of collection or legal fees should applicant not make payment pursuant to Mail-O-Matic Services terms.

I hereby certify that I have read and understand this application and that all of the statements and information contained herein is true, correct, complete, and made in good faith.

*****Must be signed by an officer of corporation or owner for application to be processed*****

SIGNATURE: _____
if submitting via email, typing your name will constitute your signature

DATE: _____