



Business Credit Application

General Business Information

Business Name: _____

Phone Number: _____

Billing Address: _____

Fax Number: _____

City: _____

Street Address: _____

Province: _____ Postal Code: _____

City: _____

Accounts Payable Contact: _____

Province: _____ Postal Code: _____

Contact Phone #: _____

Email: _____

Contact Fax #: _____

D-U-N-S #: _____

Type of Business: Corporation Partnership Sole proprietor Government Non-Profit

How Long has Applicant Been in Business?: _____

How Long has Applicant Been at Present Location?: _____

Bank Reference

Bank: _____

Account Number: _____

Address: _____

Phone Number: _____

City: _____

Fax Number: _____

Province: _____ Postal Code: _____

Business Reference

Company Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Company Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Company Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Applicant certifies that the above information is true and correct. The applicant also acknowledges that all accounts are due and payable as specified on the invoice, or whereby interest will be charged at the rate specified on our terms and conditions found at <http://secureship.ca/terms.aspx>.

<p>Inter office Use Only</p> <p>Date: _____</p> <p>Credit Limit: _____</p> <p>Approved by: _____</p>
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As an authorized agent, I hereby authorize the institutions listed in the above credit reference request, to release the necessary information to the company for which credit is being applied in order to expedite our credit approval

Signature: _____
Name: _____
Title: _____
Date: _____