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## CREDIT APPLICATION

FIRM NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

DESCRIPTION OR NATURE OF BUSINESS: \_\_\_\_\_

COMPANY BANKING FACILITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MANAGER'S NAME: \_\_\_\_\_

GIVE THREE REFERENCES WHERE YOU HAVE ESTABLISHED CREDIT  
FIRM CONTACT PHONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OUR TERMS ARE NET 30 DAYS. WILL YOU AGREE TO THESE TERMS?  
YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE EXPLAIN IF NO WAS MARKED: \_\_\_\_\_

ALL SHIPMENTS SENT OUT COLLECT AND NOT PAID IN 30 DAYS BY THE CONSIGNEE SHALL BE CHARGED BACK TO YOUR ACCOUNT FOR PAYMENT. ON DEFAULT THE CUSTOMER AND ANY GUARANTORS OF THE DEBTS TO BE INCURRED AGREE THAT THE LAWYER'S COSTS OF RECOVERING THE DEBT ARE ALSO PAYABLE ON A SOLICITOR AND HIS OWN CLIENT BASIS.

SIGNATURE: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_