CanCrete Equipment Ltd.
proudly Canadian

# CREDIT APPLICATION

## Customer

Full Business or Corporate Name _____

Operating Name _____ ☐ Corporation ☐ Partnership ☐ Proprietorship

Type of Business _____ Date Started _____ # of Employees _____

Mailing Address _____ City _____ Postal Code _____

Shipping Address (if different) _____ City _____ Postal Code _____

Office Phone # _____ Fax # _____ Purchase Orders Required? Yes___ No ___

Owner (s) _____ _____ _____

A/P Contact _____ A/P Email (for sending invoices): _____

Person(s) authorized to make purchases on account _____

## Banks

Bank Name _____ Phone # _____ Contact _____

Bank Address _____ Chequing Acct # _____

## Trade References

| | Name | Phone # | Fax # (REQUIRED) | Contact Name |
|---|---|---|---|---|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |

Credit terms are net 30 days from date of purchase or service date. 2% interest per month will be charged on all past due accounts. The undersigned certifies the above information to be true, and agrees to pay all costs and interest incurred to collect outstanding accounts. The undersigned also consents to the obtaining of credit and/or personal information as may be required at any time in connection with the credit applied for or the renewal or extension thereof, and to the disclosure of any credit information concerning the undersigned to any credit reporting agency, or to any person with whom the undersigned has or proposes to have financial relations.

_____ _____ _____

Authorized Signature of Corporate signing officer | Name and Position | Date