

CREDIT APPLICATION

Please complete this form and return via fax (204) 233-5677 or email <u>accounting@realsafety.ca</u>

BUSINESS CONTACT INFORMATION						
Trade Name of Business:						
Legal Name of Business (if different):						
Registered Address:						
City/Town:		Province:		Postal Code:		
Mailing Address (if different):						
City/Town:		Province:		Postal Code:		
Phone:		Fax:				
E-mail:		Website:				
Date Business Commenced:						
Sole Proprietorship:	Partnership:	ership: Corporation:		Other:		
Nature of Business:						
GST #		PST #				
Names of Principals/Owners:		Title:				
			Title:			
			Title:			
Accounts Payable (A/P) Contact:						
A/P Phone:		A/P Email:				
A/P Fax:						
	BANKING IN	FORMATIC	N			
Bank Name:						
Bank Address:			Phone:			
City/Town:		Province:		Postal Code:		
Account Number:						
Bank Officers Name:		Bank Officers Phone:				

Company Name:				
Address:				
Phone:	Email (required):			
Accounts Receivable Contact:				
Company Name:				
Address:				
Phone:	Email (required):			
Accounts Receivable Contact:				
Company Name:				
Address:				
Phone:	Email (required):			
Accounts Receivable Contact:				

TERMS AND CONDITIONS I/we hereby request credit accommodations and agree to pay for all purchases in accordance with your terms which are Net 30 Days. I/we further agree to pay a service charge on all overdue amounts at a rate of 2% per month (24% per annum). I/we hereby provide you consent to obtain such credit reports or other information as may deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement.				
The undersigned is/are applying for credit and, if accepted agree to be bound by the terms as being set out herein. It is further agreed that if accepted for credit, I/we hereby agree to pay for all fees and disbursements incurred by you should the account become delinquent and have to be placed in the hands of a third party for collection.				
I/we certify that all of the above information is true and accurate.				
Date:	_ Signature:	_ Title:		
Date:	_ Signature:	_ Title:		
Comments:				