

Country Line™

CREDIT APPLICATION

Registered Business Name : _____
Business Address : _____
Principle line of Business : _____ Date Business started : _____
Business Telephone # : _____ Business Fax # : _____
Credit applied for (amount) : _____ Email Address: _____
PST # : _____ GST # : _____

Name of owner/proprietor (first) : _____
Position held : _____
Address : _____
Telephone # : _____ Fax # : _____
Social Insurance Number : _____

Name of owner/proprietor (Second) : _____
Position held : _____
Address : _____
Telephone # : _____ Fax # : _____
Social Insurance Number : _____

TRADE REFERENCES

(Please detail below the names of three Trade references)

Name : _____ Tel # : _____ Fax # : _____
Address : _____
Name : _____ Tel # : _____ Fax # : _____
Address : _____
Name : _____ Tel # : _____ Fax # : _____
Address : _____

Bank details

Name of Bank : _____ Account # : _____
Name of contact person : _____ Tel # : _____ Fax # : _____
Address : _____

Details of credit card

Type of card : Visa Mastercard
Card # : _____
Valid until : _____

Terms of payment

All accounts are due on a fifteen day basis. Overdue accounts will be subject to a service charge of 1.5% per month. (18% per annum)

I hereby certify the above information to be correct and authorize Country Line Inc. to obtain such credit information as necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement. This consent is given pursuant to section 12 of the credit reporting Act, R. S. R. C. 1979, Chapter 78. Financial statement at tached.

Customer signature : _____
Position of Signee : _____

Date : _____

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