

Business Credit Application Please note that all information will be kept strictly confidential.

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.ast:	First:		Middle Initial:	Title
Name of Business:				NEQ (Quebec)#
Address:				TTE Q (Question)
	•		710	
City:	Si	tate:	ZIP	
Phone:		Email:		
licant Informa	tion			
Legal Name of Company:		In Busi	In Business Since:	
Trade Name Which E	Susiness Operates:			
	0		Dantaanah	in December
If Division/Subsidiary	, Name of Parent Compa	orporation any:	Partnersh	ip Proprietorship
	In Business Since	e:		
Address:	City:	Sta	te: ZIP:	Phone:
				— .
N	and the Indiana and Indiana	D		
Name of Company P	rincipal Responsible for	Business Transaction	ns:	Title:
Name of Company P Address:	rincipal Responsible for City:	Business Transaction Sta		Title:
Address:		Sta		Title:
				Title:
Address:	City:	Sta		Title:
Address: Phone:	City:	Sta		Title: Company Name:
Address: Phone: References	City:	Sta Email:		
Address: Phone: References	City:	Sta Email:		
Address: Phone: e References Company Name:	City:	Sta Email: Company Name:		Company Name:
Address: Phone: e References Company Name:	City:	Sta Email: Company Name:		Company Name:
Address: Phone: e References Company Name: Contact Name:	City:	Sta Email: Company Name: Contact Name:		Company Name: Contact Name:
Address: Phone: e References Company Name: Contact Name:	City:	Sta Email: Company Name: Contact Name:		Company Name: Contact Name:
Address: Phone: e References Company Name: Contact Name:	City:	Sta Email: Company Name: Contact Name:		Company Name: Contact Name:
Address: Phone: References Company Name: Contact Name: Address: Phone: Fax:	City:	Sta Email: Company Name: Contact Name: ddress:	te: ZIP:	Company Name: Contact Name: Address: Phone: Fax:
Address: Phone: References Company Name: Contact Name: Address:	City:	Sta Email: Company Name: Contact Name: ddress:	te: ZIP:	Company Name: Contact Name: Address:
Address: Phone: References Company Name: Contact Name: Address: Phone: Fax:	City: C C P Fee: A	Sta Email: Company Name: Contact Name: ddress:	te: ZIP:	Company Name: Contact Name: Address: Phone: Fax:



Business Credit Application

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BANK REFERENCE

Date:
To whom it may concern,
In order to assist your client in securing credit with our company, we are asking that you kindly provide the required information.
We have listed below the credit information requested by our organization on your client. It is understood that this information is strictly confidential and is to be used by Exportation Multi Tires and Export Development Canada only. This declaration is duly signed by an authorized officer of our Bank.
Thank you very much for your assistance.
We are looking for the following information:
1. What is the length of time that [Company] has had an open account with you?
2. Is there a history of overdrafts on this account?NO YES
3. Has [Company] been a good banking client?NO YES
4. NSF cheques (the last 12 months): NO YES, (Yes Please comment)
The above client is reliable for an open credit line up to 90 days terms YESNO
Signature : Title :
Bank Name : Bank Address :
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PLEASE AFFIX THE BANK'S STAMP THANK YOU.