

## **Building Supplies**

**COMPANY INFORMATION** 

7883 Keele Street, Unit 7, Concord, Ontario, L4K 1Y6

Phone: 905-761-1002, Fax: 905-761-6126, csrbuilding.ca

## **Credit Application**

Legal Name of Business:				
Principal Business Address:			Street/City/Province/Postal Code	
Shipping Address: (If Different)				
Phone Number:	Fax Number:	Email		
Legal Status: Corporation / Partnership / Sole	e Proprietorship <i>(CIRCLE ONE)</i>	Have You Had a Previous Bankruptcy		
Invoices and Monthly Statements: Emailed / Ma	ailed <i>(CIRCLE ONE)</i> Purchase	orders require: YES / NO <i>(CIRCLE ONE,</i>	)	
In Business Since: Do You: Own or Lease your principal place of bu	Type Of Business			
Do You: Own or Lease your principal place of bu	usiness? Yes / No <i>(CIRCLE DN.</i>	(E) Name, Address, Phone Numb	er of Landlord <i>(BELOW)</i>	
PRINCIPALS/OWNERS INFORMATION				
Name and Title			Home Phone Numbers	
1. 2 3.				
3				
Do you qualify for P.S.T. Exemption? Yes / N				
	,	•		
BANK INFORMATION: (MANDATORY)				
Bank Name:	Bank Address:			
Contact Person	Fax#Contact Person Email address			
Branch Number:	Bank Account Nun	1ber		
TRADE REFERENCES:				
1. Company NameContact Person		Jerson		
Phone Number	Email/Fax	#		
2.Company Name Contact Person		erson		
Phone Number Email/Fax #		#		
3.Company Name Contact Person		erson		
Phone Number		K #		
Requested Monthly Credit: \$				
Terms of Sale: I certify that all the abo				
following date of invoice. A service charg				
if the business is a partnership all debts a				
by CSR BUILDING SUPPLIES LTD. I also he BUILDING SUPPLIES LTD. I have the authors.			on my bank dealings to CSR	
I/WE hereby (jointly and severally) person			or all goods which you may	
supply to my/our firm. I /We, personally				
any part thereof, that you may renew				
relinquish other securities as you may th				
agree, that this personal guarantee shall				
C:	П: N	n		
Signature:	Print Name:	Date:		