



**KERRISDALE LUMBER
HOME**
6365 West Blvd
www.kerrisdalelumber.ca

**KERRISDALE LUMBER
CONTRACTOR DIVISION**
1253 West 76th Ave
www.kerrisdalelumbercd.ca

(604) 261-4274
info@kerrisdalelumber.com

Application for Credit - Personal

LEGAL NAME:			
ADDRESS:	CITY:	PROVINCE:	POST. CODE:
TELEPHONE:	FAX:	EMAIL:	CELL:
GENERAL INFORMATION			
EMPLOYER:		TELEPHONE:	
S.I.N.:		DATE OF BIRTH:	
ADDRESS:			
PROVINCE:		POSTAL CODE:	
DO YOU OWN OR RENT YOUR RESIDENCE?		LANDLORD:	
BANKING INFORMATION			
BANK NAME:		ACCOUNT NO:	
ADDRESS:		TELEPHONE:	
CONTACT NAME:			
CREDIT CARD TYPE:		CARD NO:	
NAME ON CREDIT CARD:		EXPIRY DATE:	
<p>The Kerrisdale Lumber Company covenants that the credit card information issued above is strictly confidential to the establishment and maintenance of the credit account for herein. The credit card holder, being the undersigned of this application for credit, covenants by execution of their signature authorization save that The Kerrisdale Lumber Company to charge the balance due, when in default hereunder to the said credit card account and the undersigned agrees to pay same to credit card issuer pursuant to the card holder agreement they have established with the above credit card issuer.</p>			
REFERENCES			
NAME:	EMAIL :	TEL:	
NAME:	EMAIL :	TEL:	
<p>CREDIT TERMS I/We the undersigned agree to pay the account within terms as stipulated on each invoice. All account are due and payable on the 10th of the following month of the date of purchase. Interest will be charged (at a rate of 2% per month, compounded monthly, being 26.82% (per annum) on all overdue accounts.</p>			
<p>The Customer authorized The Kerrisdale Lumber Company and its agents to obtain such credit reports, records, or other information or conduct such other investigations as may be deemed necessary in connection with the establishment and maintenance of a credit account or any other direct business requirement. This consent is given pursuant to Section 10 of the Credit Reporting Act, R.S.B.C. 1996</p>			
CUSTOMER SIGNATURE:			DATE:
WITNESS SIGNATURE:			DATE:

Please email completed application to karen@kerrisdalelumber.com