CREDIT APPLICATION- Yorkland Controls Limited

Company Name: Address:			
Telephone: Website: Email:		Fax:	
☐ Manufa☐ Owner (☐ Distribu	y Management cturer (OEM) (Municipality/Institution/) ttion		
Proprietorship	Partnership	Limited	
Name & Address of (Owner:		
Finance Institution &	Address:		
Contact Name:		Phone:	
Purchaser: Account Payable:		г ч	
Email Invoice: Email Statement:	Yes No Yes No		
Trade References:			
Phone:	Fax:	Email:	
2			
Phone:		Email:	
-		Email:	
The undersigned agreapplied for and conse the undersigned has correct as of the date	es that the usual credit inquits to the disclosure of such may have financial relationships	uiries may be made at any ti ch information to any person ions. The undersigned affirm	me in conjunction with the credit hereby or to any credit reporting agency with whom is that the information given herein is true an
		Print:	Date:

OFFICE LOCATIONS

Toronto: 2693 Steeles Ave West, Toronto Ontario, M3J2Z8 (t) 416.661.3306 (f) 416.661.3320

Mississauga: 855 Matheson Blvd East, Unit #4, Mississauga Ontario, L4W2L6 (t) 905.624.3301 (f) 905.624.3301 Stoney Creek: 710 South Service Road, Unit #5&6, Stoney Creek Ontario (t) 519.473.1307 (f) 519.560.0275

Ottawa: 1050 Baxter Road, Unit 6A, Ottawa Ontario, K2C 3P1 (t) 613.721.3301 (f) 613.721.4906

Dartmouth: 40 Fielding Ave, Dartmouth Nova Scotia (t) 902.481.7590 (f) 902.481.7587

Toll Free: 1.877.733.3833 email: yorkland@yorkland.net