



Credit Application Form

General Information

Company: _____ Accounts Payable: _____
 Billing Address: _____ Phone#: _____
 City#: _____ Email#: _____
 Postal Code#: _____ Province#: _____ GST/HST: _____
 Year business commenced: _____ Website: _____
 Company Officer: _____ Controller: _____
 Business structure: Proprietorship Partnership Corporation
 Preferred method of invoicing: Mail Email Uploading to Portal
 How did you here about us? _____

Bank Reference

Name: _____ Address: _____
 Phone#: _____ City#: _____
 Account Number: _____ Postal Code#: _____ Province#: _____

Trade References: Name, address, contact person, telephone and email

1. _____
 _____ Phone#: _____ Email: _____
 2. _____
 _____ Phone#: _____ Email: _____
 3. _____
 _____ Phone#: _____ Email: _____

The Undersigned:

1. Hereby requests that an account be opened with : Equipment Corps Inc.
2. Certifies that information contained in this application is true
3. Accepts Terms: 2% per month, 24% per annum, net 30 days

MM / DD / YYYY

_____ Date

_____ Name

_____ Signature