



5728 10th Street NE
 Calgary, AB T2E 8W7
 Phone: (403) 250-3376
 Fax: (403) 291-3992
www.cascadeweb.ca

CUSTOMER CREDIT APPLICATION

DATE: ____/____/____ ACCOUNT OPENING REQUEST OR FILE REVISION

Legal name: _____ **Corporation** **Association** **Other**
Business name: _____ **Telephone:** (____)____-_____
Address: _____ **Fax:** (____)____-_____
 _____ **E-mail :** _____
Nature of Business: _____ **Number of years in business:** _____

Officers or Shareholders	Name	Residential address
President:	_____	_____
Vice-president:	_____	_____
Secretary-Treasurer:	_____	_____
Accounts Payables:	_____	_____
Number of employees:	_____	Sales (last 12 months): _____ (\$- in thousands)

In the case of a sole (only) owner or an individual

Name: _____ Residential Address: _____
 Employer: _____ Address of the Employer: _____
 S.I.N.: _____ Driver's license no: _____ Date of birth: ____/____/____

Other information

Bank: _____ Branch: _____
 Account No.: _____ Telephone: (____)____-_____

References (Suppliers, Loan Agencies)	/	City	/	Tel.:	(____)____-_____
_____	/	_____	/	Fax:	(____)____-_____
_____	/	_____	/	Tel. :	(____)____-_____
_____	/	_____	/	Fax :	(____)____-_____
_____	/	_____	/	Tel. :	(____)____-_____
_____	/	_____	/	Fax :	(____)____-_____
_____	/	_____	/	Tel. :	(____)____-_____
_____	/	_____	/	Fax :	(____)____-_____

Amount of foreseen monthly purchases: _____ \$ Required credit limit : _____ \$
 VISA No.: _____ MasterCard No.: _____ Expiry Date: _____
 G.S.T. No.: _____ P.S.T. No.: _____

Updated 12/29/11



5728 10th Street NE
Calgary, AB T2E 8W7
Phone: (403) 250-3376
Fax: (403) 291-3992
www.cascadeweb.ca

CUSTOMER CREDIT APPLICATION – PAGE 2

SPECIAL AUTHORIZATION

The undersigned hereby consents to Cascade Equipment Ltd.'s use of a credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application.

Signed _____, Date _____.

Witness

Signature authorised by the aforementioned Company

Date

Name of the representative

I declare the above-mentioned information to be true.

Signature _____ Name (in capital letters) _____ Title _____

**We thank you for your interest in opening an account with us.
**** ALL ACCOUNTS NET 30 DAYS ******

Updated 12/29/11