

TEL: (905) 637-3862 · FAX: (905) 637-8841 · Toll Free US & Canada: 1-800-381-5335

## CDN APPLICATION FOR CREDIT

(PLEASE PRINT CLEARLY)

<b>Individual</b> <input type="checkbox"/> <b>Corporation</b> <input type="checkbox"/> <b>Sole Proprietor</b> <input type="checkbox"/> <b>Partnership</b> <input type="checkbox"/> <b>Other</b> <input type="checkbox"/>				
Customer Legal Name <input style="width:90%;" type="text"/>				
Website <input style="width:90%;" type="text"/>				
Customers Trade Name <input style="width:90%;" type="text"/>				
Address <input style="width:90%;" type="text"/>				
PO Box <input style="width:20%;" type="text"/>	City <input style="width:30%;" type="text"/>	Province <input style="width:15%;" type="text"/>		
Postal Code <input style="width:15%;" type="text"/>	Telephone # <input style="width:20%;" type="text"/>	Fax # <input style="width:15%;" type="text"/>		
Type of Business <input style="width:90%;" type="text"/>				
No. of Employees <input style="width:15%;" type="text"/>	Date Business Commenced <input style="width:75%;" type="text"/>			

### OFFICERS AND DIRECTORS / PARTNER OR SHAREHOLDERS / PROPRIETOR

1. Name <input style="width:30%;" type="text"/>	Title <input style="width:30%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
2. Name <input style="width:30%;" type="text"/>	Title <input style="width:30%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
3. Name <input style="width:30%;" type="text"/>	Title <input style="width:30%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
Accounts Payable Contact <input style="width:40%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>	
Send Invoice via e-mail <input style="width:40%;" type="text"/>	Fax <input style="width:20%;" type="text"/>	
GST / HST # <input style="width:80%;" type="text"/>		

### BANKING INFORMATION

Bank <input style="width:30%;" type="text"/>	Contact <input style="width:30%;" type="text"/>
Address <input style="width:90%;" type="text"/>	
Telephone <input style="width:20%;" type="text"/>	Fax <input style="width:20%;" type="text"/>
Account Number <input style="width:30%;" type="text"/>	Transit #: <input style="width:30%;" type="text"/>

### TRADE REFERENCES

1. Company Name <input style="width:40%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
Contact <input style="width:40%;" type="text"/>	Fax <input style="width:20%;" type="text"/>
2. Company Name <input style="width:40%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
Contact <input style="width:40%;" type="text"/>	Fax <input style="width:20%;" type="text"/>
3. Company Name <input style="width:40%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
Contact <input style="width:40%;" type="text"/>	Fax <input style="width:20%;" type="text"/>
4. Company Name <input style="width:40%;" type="text"/>	Telephone <input style="width:20%;" type="text"/>
Contact <input style="width:40%;" type="text"/>	Fax <input style="width:20%;" type="text"/>

### AGREEMENT / TERMS AND CONDITIONS

We hereby warrant that the information contained herein is true and exact. We acknowledge that the said information and authorizations were given in order to allow Mars Metal Company to have access to and possession of all pertinent information relating to our actual and future financial position in order to evaluate the opportunity to establish with us a contractual relationship and give maintain or modify a line of credit. We hereby authorize Mars Metal Company, to obtain, verify and complete any information useful for the above-mentioned purpose from the companies listed herein as well as from any credit information agency or organization authorized to communicate information. **We hereby agree to pay outstanding accounts within 30 days of invoice date or as otherwise agreed in writing.**

Name <input style="width:450px;" type="text"/>	Title <input style="width:150px;" type="text"/>
Signature <input style="width:450px;" type="text"/>	Date <input style="width:150px;" type="text"/>