

Credit Application

In order to establish an account with our firm, the following information is requested:

Services Address:

Company: _____
Address: _____

City: _____ Prov: _____
Postal Code: _____ Contact Name: _____
Phone: _____ Fax # : _____

Billing Address:

Company: _____
Address: _____

City: _____ Prov: _____
Postal Code: _____ Contact Name: _____
Phone: _____ Fax # : _____

Principal Shareholders: _____

Parent Company (if any): _____

Products and services Provided: _____

Length of time company has been operating: _____

Date of Incorporation: _____

No. of employees: _____

Rent or own premises: _____

If renting, Landlord name, address and telephone: _____

Bank References:

Company: _____
Address: _____

Bank: _____ Branch: _____

Account No.: _____ Manager: _____
Phone: _____

Other Suppliers and Trade References:

a) Company: _____
Address: _____
Contact: _____ Phone: _____
Fax #: _____

b) Company: _____
Address: _____
Contact: _____ Phone: _____
Fax #: _____

Are you a member of the following, if yes please print your member #:

a)Credit Bureau: _____ b)Creditel: _____
c)O.S.I.: _____ d)Opt. Group: _____
e)COPS: _____

The above customer agrees to the credit terms and conditions of RODENSTOCK CANADA INC.
The above authorizes RODENSTOCK to obtain credit information to establish adequate credit as required.

Name: _____ Signature: _____
Title: _____ Date: _____