

## Credit Application

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

### Service Address:

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Tel #: \_\_\_\_\_ Fax #: \_\_\_\_\_

### Billing Address:

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Tel #: \_\_\_\_\_ 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

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
Acct No.: \_\_\_\_\_ Manager: \_\_\_\_\_  
Phone #: \_\_\_\_\_

### Other Suppliers and Trade References

a) Company Name/Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_  
b) Company Name/Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Tel: \_\_\_\_\_ 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 \_\_\_\_\_