



# APPLICATION FOR CREDIT

VANCOUVER BRANCH  
26688 56th Avenue Langley, B.C.V4W 3X5 Tel: 604 607 6000

PLEASE FAX TO: 604 607 6010

TERRITORY \_\_\_\_\_ CUSTOMER CLASS: \_\_\_\_\_  
 GEO AREA: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ PROVINCE/ STATE: \_\_\_\_\_

POSTAL CODE/ ZIP CODE: \_\_\_\_\_ ACCOUNTING PHONE: ( ) \_\_\_\_\_ ACCOUNTING FAX: ( ) \_\_\_\_\_

A/P CONTACT: \_\_\_\_\_ A/P EMAIL: \_\_\_\_\_

SHIP TO: \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

RELATED COMPANIES: \_\_\_\_\_

HOW LONG IN BUSINESS: \_\_\_\_\_ HOW LONG AT PRESENT LOCATION: \_\_\_\_\_

GST# \_\_\_\_\_ PST# \_\_\_\_\_ EXEMPT \_\_\_\_\_

### BANK REFERENCE

NAME: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_ OTHER BANKS: \_\_\_\_\_

### PRINCIPALS

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

### TRADE REFERENCES

1: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

2: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

3: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

<b>PAYMENT TERMS</b> <b>NET 30 DAYS FROM INVOICE</b>
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I/we hereby request to establish credit privileges with Redwood Plastics Corp. and agree to pay for all purchases in accordance with the above TERMS OF SALE. I/we further agree to pay a service charge on any amounts past due calculated at 1.5% per month (18% per annum).

I/we certify the above information to be correct. Further, I/we authorize Redwood Plastics Corp. to obtain credit reports or other information as deemed necessary on the applicant or its principals in connection with the maintenance and collection of this credit account or for any other business reason.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REMIT TO ADDRESS:** 19695 - 92 A Ave, Langely, B.C., V1M 3B3, Canada  
Phone: 604.882.9666 Fax: 604.882.9008