



Commercial Credit Application

COMPANY INFORMATION				
Full Company Name				
Address				
City	Province	Postal Code	Phone	
Type of Business				No. of Employees
Business Start Date	Structure	Incorporated <input type="checkbox"/>	Partnership <input type="checkbox"/>	Proprietorship <input type="checkbox"/>

PRINCIPALS/SHAREHOLDERS				
Name				
Address				
City	Province	Postal Code	Phone	
Background/Previous Experience				
Name		Title		Ownership Percent
Address				
City	Province	Postal Code	Phone	
Background/Previous Experience				

BANK REFERENCES				
Bank Name				
Address				
City	Province	Postal Code	Phone	
Branch		Account Number(s)		
Average Balance on Deposit		Overdraft/Loan Amount(s)		
Bank Name				
Address				
City	Province	Postal Code	Phone	
Branch		Account Number(s)		
Average Balance on Deposit		Overdraft/Loan Amount(s)		

TRADE REFERENCES				
Company Name				
Address				
City	Province	Postal Code	Phone	
Nature/Amount of Trade				
Company Name				
Address				
City	Province	Postal Code	Phone	
Nature/Amount of Trade				

FINANCIAL SUMMARY	
Total Revenue/Sales \$	Total Assets \$
Income Before Taxes \$	Total Debt \$
Net Income After Taxes \$	Total Shareholder Equity \$

The undersigned certifies the above information to be true and correct.

X _____ Title _____ Date _____
 Authorized Signature