

CREDIT APPLICATION
 TERMS: NET 30 DAYS

COMPANY INFORMATION		
Exact Name of Business:		
Street Address (Billing):		
City:	State/Prov:	Zip:
Federal Tax ID (USA):		
Person to Contact in Accounts Payable:		
Payable Phone Number:		
Payable Fax Number:		
Email:		
Line of Business:		
Date of Incorporation:		
Principal Owner or Authorized Officer of Business:		
BANK INFORMATION		
Name:	Account #:	
Address:		
City:	State/Prov:	Zip:
TRADE REFERENCES (List a minimum of THREE suppliers)		
Business Name:		
Account Contact:		
Phone:	Fax:	
Business Name:		
Account Contact:		
Phone:	Fax:	
Business Name:		
Account Contact:		
Phone:	Fax:	
CREDIT TERMS & CONDITIONS		
THE ABOVE INFORMATION is for the purpose of obtaining NET 30 credit privilege and is warranted to be true. I/we hereby authorize Elkor Technologies Inc. to investigate the references listed pertaining to my/our credit and financial responsibility. A copy of this document shall be as the original.		Accounts past 30 days are subject to interest rates as per the original invoice.
Initials _____		This agreement has its situs at London, Ontario and in the event of dispute over its terms, the parties agree that the Courts of the Judicial District of Middlesex shall have jurisdiction.
Name of Authorizing Officer:		
Title:		
Signature: _____		Date: _____