



CANADIAN CUTTING AND CORING (TORONTO) LTD.

5220 Bradco Blvd. Phone: (905) 624-1414
Mississauga, ON L4W 1G7 Fax: (905) 624-1736

CONCRETE CUTTING • CORESCAN • EXCAVATING • REMOVAL

Customer Account Credit Application

General Information

Legal Company Name: _____
Affiliate Company Name (if any): _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Tel: _____ Fax: _____
Accounts Payable Contact: _____ Ext: _____ Email: _____

Business Information

Type of Business: _____
Ownership: Individual Partnership Corporation
Years in Business: _____ No. of Employees: _____
Annual Sales: \$ _____ Credit Requested: \$ _____
Are POs Required: Yes No

Company Owner(s) – Principals

Name: _____
Address: _____
City: _____ Prov: _____
Postal Code: _____ Tel: _____
Email: _____ D.O.B: _____

Bank Information

Bank Name: _____ Transit #: _____ Account #: _____
Address: _____ Account Manager: _____
Tel: _____ Fax: _____ Assignment of Accounts Receivable: Yes No
Type of Account: Business Personal

Trade References	City	Phone #	Fax # or Email
1.			
2.			
3.			
4.			
5.			

Application must be completed in its entirety to facilitate processing

- We/ I make this application for a charge account and give **Canadian Cutting and Coring (Toronto) Ltd.** authorization to obtain and report Business information and Personal credit information on the principals of this company including detailed bank reports for the purpose of opening this account and monitoring it for the business relationship.
- We/ I authorize the exchange of business and personal information on an ongoing basis with credit bureaus and other trade suppliers in order to protect and ensure the completeness of the information and to maintain the integrity of the credit granting system.
- We/ I authorize the co-operation with local, provincial, and national authorities in the investigation of unlawful or improper activities in order to protect both parties from fraudulent transactions.
- We/ I authorize the disclosure of business and personal information where necessary to protect your interest, and ours.
- By signing below, it is understood that We/ I accept and will comply with the credit terms.

Applicant's Name: _____ Signature _____ Date: _____

Credit Terms: Net 30 Days

Rep: _____ Processed By: _____ Authorized By: _____ Credit Approved: \$ _____