

Credit Application Form

Company/
Trade Name

Address

City

Postal Code

Province

Phone

Fax

of Years
in Business

Nature
of Business

of
employees

Purchasing
contact

Phone

Email

Maintenance/
Engineering
Contact

Phone

Email

Accounts
Payable
Contact

Phone

Email

How would you like
to receive your invoices?

Mail

Email :

Purchase Orders Are
required on All Order

No

Yes

Estimated
Monthly Purchases

Principals in Company

1. Name

Title

2. Name

Title

3. Name

Title

Credit References

Bank Information (All Fields are mandatory)

Bank Name	Bank Full Address		
Bank Institution Number	Bank Account Number		
Bank Transit Number	Bank Phone	Bank Fax	

Supplier References

1.

Company Name

Contact Name

Address

Email

Phone

Fax

2.

Company Name

Contact Name

Address

Email

Phone

Fax

3.

Company Name

Contact Name

Address

Email

Phone

Fax

We/I hereby consent House of Electrical Supplies Limited to conduct a credit history; to acquire our bank and credit information for the sole purpose of their credit department. We/I understand that upon credit approval, all accounts are due and payable according to the terms indicated on the statements & invoices; any overdue balances will be subject to a 2% per month service charge.

Authorized Bank Account Signatory	Print Name	Position	Date
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Internal Use Only	<input type="checkbox"/> ACCEPTED	Customer#	Salesperson	Terms	Credit Limit	Currency
	<input type="checkbox"/> DECLINED					