



**ESTATE Lighting Supply Ltd.**

190 BOVAIRD DRIVE WEST, UNIT 54  
BRAMPTON, ONTARIO, CANADA  
L7A 1A2

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PHONE: (905) 874-1022 FAX: (905) 874-0095

# CREDIT APPLICATION

**FULL NAME OF COMPANY:** \_\_\_\_\_

**TRADING AS:** \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_

**CITY / PROVINCE:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**CONTACT NAME:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_ **CELL PHONE #:** \_\_\_\_\_

## ***TRADE REFERENCES***

<b>1. COMPANY NAME:</b> <b>PHONE #</b> <b>FAX #</b> <b># OF YEARS DOING BUSINESS</b>	<b>2. COMPANY NAME:</b> <b>PHONE #</b> <b>FAX #</b> <b># OF YEARS DOING BUSINESS</b>
<b>3. COMPANY NAME:</b> <b>PHONE #</b> <b>FAX #</b> <b># OF YEARS DOING BUSINESS</b>	<b>4. BANK REFERENCE:</b> <b>ADDRESS:</b> <b>PHONE #</b> <b>FAX#</b> <b>CONTACT:</b>

## **COMPANY INFORMATION:**

**TYPE OF BUSINESS:** \_\_\_\_\_

**YEARS OF BUSINESS UNDER PRESENT NAME:** \_\_\_\_\_

**COMPANY OFFICERS(1):** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**COMPANY OFFICERS(2):** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**OWNED** \_\_\_\_\_ **LEASED** \_\_\_\_\_ **RENTED** \_\_\_\_\_ **OTHER** \_\_\_\_\_

**ESTIMATED CREDIT REQUIRED (MONTHLY):** \$ \_\_\_\_\_

**G.S.T. #** \_\_\_\_\_ **P.S.T. #** \_\_\_\_\_

**ACCOUNTS PAYABLE CONTACT:** \_\_\_\_\_

**PURCHASING AGENT:** \_\_\_\_\_

I / WE HEREBY MAKE APPLICATION FOR OPEN TERMS AND CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND AUTHORIZE VERIFICATION OF THE ABOVE AND AGREE TO ABIDE BY THE PAYMENT TERM " ESTATE LIGHTING "

**SIGNED / PRINT** \_\_\_\_\_ **DATE:** \_\_\_\_\_