



Port Williams Phone: 542-3835 Fax: 542-1340
Windsor Phone: 798-1118 Fax: 798-0126

Commercial Account Application

Bulk Delivery iFuel Gas Bar Cardlock

Company Legal Name: _____

Trade Name: _____ Attn: _____

Mailing Address: _____ Town/Prov.: _____ PC: _____

Civic Address: _____ Town/Prov.: _____

Phone: _____ Cell: _____ Fax: _____ Email: _____

Nature of Business: _____ Number of years under current ownership: _____

Type of Business: Proprietorship Limited Company Partnership

Principal's/Officer's Information...

<u>Principal(s)</u>	<u>SIN (OPTIONAL)</u>	<u>Home Address</u>	<u>Phone #</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____

<u>References</u>	<u>Address</u>	<u>Phone #</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

<u>Bank</u>	<u>Location</u>	<u>Account Type</u>
1. _____	_____	_____

Fuel Type: _____ Credit Limit Requested: \$ _____

I/We hereby represent that I/We are authorized to submit this application on behalf of the customer name above and that the information provided is true. I/We understand that the information given is for the purpose of obtaining goods on credit, reviewing or adjusting credit limits, and for collection purposes where necessary. I/We hereby authorize the person or firm to whom this application is made, any Credit Bureau or other investigation agency to investigate the references herein listed or to receive or give credit information or any other data obtained from me/us, or from any other person pertaining to my/our credit or financial responsibility. It is agreed and understood that all necessary collection and legal costs and interest at 2% per month be charged to my account in the event of default or failure to pay for all invoices within established terms specified.

PAYMENT TERMS: Net seven (7) days with pre-authorized payments for the previous calendar week's transactions.

I/We have read and understand all of the above and agree. I/We personally will be liable for any debts incurred by this company.

Signature: _____ Date: _____

Print: _____ Title: _____