



CREDIT APPLICATION

GENERAL

Legal Business Name: _____

Doing Business As: _____

Address: _____

Head Office Address: _____

Business Type: Federal Corp Provincial Corp Partnership Proprietorship

Date Started: _____

Number of Locations: _____

Phone: _____

Fax: _____

Email: _____

OWNERSHIP & MANAGEMENT

Owner's Name: _____

Buyer: _____

Email: _____

A/P Contact: _____

Email: _____

REFERENCES

BANKING

Bank Name: _____

Address: _____

Transit: _____

Account #: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

TRADE SUPPLIERS

Name: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

Name: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

Name: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

By signing below, submitting this information electronically or by facsimile, I acknowledge and agree on behalf of the business entity as its authorized officer: that all information provided is correct; that National Apparel Bureau may investigate information on the business entity with third parties for the purpose of evaluating business transactions with the applicant; that the bank and trade references listed herein are authorized by the business entity to release all information requested. All information will be kept confidential.

Date: _____

Signature _____

Name: _____

Title: _____

Phone: _____

Fax: _____

Email: _____