



APPLICATION FOR CREDIT

Fax completed form to: 604-288-7933

(PLEASE PRINT)

186 – 8120 No. 2 Rd
Suite 253
Richmond, BC V7C 5J8
Tel: 604-288-7642
Fax: 604-288-7933
E-mail: info@imgcard.com
Website: www.imgcard.com

Legal Name of Business: _____

Operating Trade Name: _____ Date Business Commenced: _____

Names and titles of Officers or Partners: _____

Company Location:

Address: _____

City: _____

Prov: _____ Postal: _____

Tel: _____ Fax: _____

E-mail: _____

Billing Address:

Address: _____

City: _____

Prov: _____ Postal: _____

Tel: _____ Fax: _____

E-mail: _____

Type of Business: (check one) Corporation Partnership Sole Proprietorship

How long in business? _____ GST #: _____ PST #: _____

BANK REFERENCE:

Bank Name: _____ Acct#: _____ Tel: _____

Address: _____ Fax: _____

City: _____ Prov: _____ Postal: _____ Bank Contact: _____

TRADE REFERENCES: (List 3 current references)

Company Name: _____ Acct#: _____ Tel: _____

Address: _____ Fax: _____

City: _____ Prov: _____ Postal: _____

Company Name: _____ Acct#: _____ Tel: _____

Address: _____ Fax: _____

City: _____ Prov: _____ Postal: _____

Company Name: _____ Acct#: _____ Tel: _____

Address: _____ Fax: _____

City: _____ Prov: _____ Postal: _____

Amount of Credit Requested: \$ _____ If required, is a financial statement available: _____

Invoices are due upon receipt unless otherwise specified on your invoice. Service charge of 1.5% per month will be charged on all accounts not paid on the due date. Credit privileges can be revoked at any time if deemed necessary by management. In the event legal action must be taken to collect a debt you owe to our company, you will be responsible for attorney's fees and other legal costs.

By the signing of this credit application, I (we) hereby authorize Image Card Solutions to obtain necessary credit information through the references provided and/or registered reporting agencies, to establish the credibility and financial responsibility of my/our company and its officer(s), and guarantee payment in accordance with the terms & conditions. I (we) understand the above stated terms and agree to abide by them.

Name: (print) _____ Signature: _____

Title: _____ Date: _____