

# CREDIT APPLICATION

Korth Group

Box 490, Okotoks, Alberta T1S 1A7

Tel. (403) 938-3255 Fax (403) 938-2722

**BUSINESS:** Product Line Proposing to Purchase from Us \_\_\_\_\_

Credit Amount Requested: \$ \_\_\_\_\_

Name of Business: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**BANK REFERENCE:**

Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Account Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**TRADE REFERENCES:**

Company Name & Contact: \_\_\_\_\_

Location: \_\_\_\_\_ Fax Number: \_\_\_\_\_

How much credit with this company \$ \_\_\_\_\_

Company Name & Contact: \_\_\_\_\_

Location: \_\_\_\_\_ Fax Number: \_\_\_\_\_

How much credit with this company \$ \_\_\_\_\_

Company Name & Contact: \_\_\_\_\_

Location: \_\_\_\_\_ Fax Number: \_\_\_\_\_

How much credit with this company \$ \_\_\_\_\_

**\* FAX NUMBERS ARE IMPORTANT**

Please indicate what type of terms you would like:

\_\_\_\_\_ OPEN TERMS (4%30,net 60 days) \_\_\_\_\_ CREDIT CARD