J.C. Bakker & Sons Limited

Credit Application

Registered or Legal
Name of Business: _____

Mailing Address: _____
Street & Number

City: _____ State/Prov. _____ Zip/Postal: _____

Business Tel: _____ Home Tel: _____ Fax: _____ Email: _____

Contact Persons:
Purchasing: _____ Payables: _____

Type of Business: Proprietorship ☐ Partnership ☐ Incorporated ☐ **Status of property:** Owned ☐ Leased ☐

Age of Business? _____ How long at present address? _____

Owner(s) or principal
Officers: Name Title Address

_____

_____

_____

Approximate monthly credit required? $_____ Are personal guarantees available if requested? Yes ☐ No ☐

Credit References: (Trade related)

1
Company Name | Complete Address
Contact Name | Phone | Fax

2
Company Name | Complete Address
Contact Name | Phone | Fax

3
Company Name | Complete Address
Contact Name | Phone | Fax

Name of Your Bank | Bank's Complete Address
Account Number | Maximum bank line of credit | Bank's Phone Number

Agreement
If credit is granted as requested, it is hereby understood and agreed by the applicant that terms and conditions of sale are strictly as set out in the Wholesale Price List of J. C. Bakker and Sons Limited. I/We hereby authorize the suppliers and bank shown to supply the above captioned company with credit and financial information as requested.

USA Federal Tax ID / CAN HST/PST

Signature: _____ Title: _____ Date: _____

Scan, Mail or Fax to:
J. C. Bakker & Sons Ltd., 1360 Third Street, St. Catharines, Ontario, Canada, L2R 6P9 Tel: 905.935.4533 Fax: 905.935.9921