



Avenue
4L5
Pacific West
Systems Supply Ltd.

HEAD OFFICE:
20109 Logan

Langley, BC V3A

Telephone: (604) 534-2060
Facsimile: (604) 534-8063

CREDIT APPLICATION

COMPANY NAME (in full) _____

IS THIS BUSINESS: SOLE PROPRIETORSHIP PARTNERSHIP LIMITED COMPANY

ADDRESS _____ CEL # _____

CITY _____ PROV. _____ POSTAL CODE _____ TEL # _____

YEARS IN BUSINESS _____ P.S.T.# _____ FAX# _____

PREVIOUS EMPLOYER (IF OPERATING LESS THAN 1 YEAR)

NAME _____ TEL # _____

PRINCIPAL

NAME _____ TITLE _____

Please Print: LAST NAME FIRST NAME INITIAL

ADDRESS _____ CITY _____

POSTAL CODE _____ TEL # _____ BIRTHDATE _____

RELATED COMPANIES OR BUSINESS: _____

BANK _____ ACCT# _____

BRANCH _____ TEL # _____

SUPPLIER REFERENCES

1. _____ TEL # _____ FAX # _____

2. _____ TEL # _____ FAX # _____

3. _____ TEL # _____ FAX # _____

AMOUNT OF CREDIT REQUESTED: _____ S.I.N. #: _____

ADDITIONAL INFORMATION:

DO YOU OWN OR RENT YOUR HOME:

OWN: _____ AMOUNT OF MORTGAGE: _____

RENT: _____ AMOUNT PER MONTH: _____

MARRIED: _____ SPOUSE NAME: _____ SINGLE: _____

VEHICLES OWNED: _____ YEAR: _____ LEASED: _____

FINANCED BALANCE OWING: _____ FINANCE CO: _____

**TERMS: 1% 15TH, NET 30
CREDIT AGREEMENT**

This consent if given pursuant to Section 12 of the Personal Information Reporting Act, S.B.C., 1973

The undersigned hereby request credit accommodation from PACIFIC WEST SYSTEMS SUPPLY LTD. And agree to pay for all purchases in accordance with the terms stated above. I/we further agree to pay a service charge on any amounts past due calculated at the rate of 26.88% per annum (2% per month) calculated compounded monthly. In the event I/we default in payment of any amount due, I/we agree to pay the actual legal cost, charges and expenses incurred by Pacific West Systems Supply Ltd. in connection with the collection of this account.

I/WE AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE AND I/WE HAVE NOT WITHHELD ANY INFORMATION. I/WE AUTHORIZE PACIFIC WEST SYSTEMS SUPPLY LTD. TO GIVE TO, OBTAIN, VERIFY, SHARE AND EXCHANGE CREDIT AND OTHER INFORMATION ABOUT ME/US WITH OTHERS, INCLUDING CREDIT BUREAUS AND OTHER PERSONS WITH WHOM YOU MAY HAVE FINANCIAL DEALINGS, AS WELL AS ANY OTHER PERSON AS MAY BE PERMITTED OR REQUIRED BY LAW.

I/we further promise, upon request from Pacific West Systems Supply Ltd., to provide our financial statements of business with 30 days of date the financial statement is completed by either ourselves or our accountant.

APPLICANT: _____ DATE: _____

SALES REPRESENTATIVE: _____ BRANCH: _____