

3594 Jarry East, Montreal, Qc, Canada H1Z 2G4 Phone: 1.877.593.4722 Fax: 514.593.4424 info@supremem.com · www.supremem.com

CREDIT APPLICATION

REGISTERED COMPANY N	IAME:		
OPREATING AS:			
ADDRESS:			
CITY: PROVINCE / STATE:			
POSTAL /ZIP CODE:	PH	ONE: ()	FAX :()
BUSINESS EMAILS (Product update / Promo, etc.):			
NAMES ADDRESSES AND			OPELCEDS
NAMES, ADDRESSES AND EMAILS OF OWNERS AND/OR OFFICERS:			
1)			
2)			
ACCOUNTS PAYABLE INF	ORMATION		
CONTACT NAME:		PH	ONE: ()
EMAIL:			
PROVINCIAL SALES TAX	NO. (CAN):		
FEDERAL ID NUMBER (US	A):		
CREDIT AMOUNT REQUES	ST?		
HOW LONG YOU HAVE BEEN IN BUSINESS?			
REFERENCES:			
COMPANY NAME:			
PHONE:()	EXT:	EMAIL:	
COMPANY NAME: PHONE:()	EXT:	EMAIL:	
THORE.()	LAI.	EWIAIL.	
COMPANY NAME:			
PHONE:()	EXT:	EMAIL:	
			n credit information with any credit s or may have financial dealings.
DATE:	<u>.</u>		
SIGNATURE:		TITLE:	<u>.</u>