

Account Number \_\_\_\_\_



Spring Valley Building Centre Ltd.  
Phone (902)836-4289 Fax (902)836-3634  
**COMMERCIAL CREDIT APPLICATION**

LEGAL NAME \_\_\_\_\_

TRADING NAME \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

Address City Prov Postal Code

MAILING ADDRESS \_\_\_\_\_

Address City Prov Postal Code

TELEPHONE \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL STATEMENT/INVOICES YES  NO  P.O. REQ'D? YES  NO

CORPORATION  SOLE PROPRIETORSHIP  PARTNERSHIP

A/P CONTACT \_\_\_\_\_

**PRINCIPALS/  
SHAREHOLDERS**

Name Address D.O.B.

Name Address D.O.B.

Name Address D.O.B.

FINANCIAL INSTITUTION \_\_\_\_\_

Name Address Phone Number

LINE OF CREDIT \$ \_\_\_\_\_ Utilized \_\_\_\_\_ %

CREDIT REFERENCES \_\_\_\_\_

Name Address Phone Number

Name Address Phone Number

**AUTHORIZED  
PURCHASERS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned hereby applies to the above company for a 30 day (net balance due in 30 days) charge account or deferred payment account and agrees to pay a service charge of not more than 27% annum(2.25% per month) compounded for the extension of credit on the above terms. I consent to Spring Valley/O'Leary Building Centre Ltd. obtaining credit information about us personally and about the applicant from third parties at any time during the application process and afterwards. Further, if an account is opened, I consent to the disclosure to credit reporting agencies and Spring Valley/O'Leary Building Centre Ltd to suppliers our credit status with Spring Valley/O'Leary Building Centre Ltd. I represent and warrant that the information in the application is true and correct in all material aspects. The undersigned consents to the obtaining of such credit information as Spring Valley/O'Leary Building Centre Ltd may require at any time in connection with the credit hereby applied for, or any renewal or extension thereof; and further consents to the disclosure of any information concerning the undersigned to any credit reporting agency, or any person with whom the undersigned, has or purposes to have financial relations. I also declare that the information disclosed in the application represents a true and accurate presentation of our current financial position in all aspects.

Dated at \_\_\_\_\_ the \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_  
City Day Month Year

APPLICANT'S SIGNATURE \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

Approved	Date	Limit
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