

**EZ STAK**

77 Grant Timmins Drive, Kingston, Ontario, Canada K7M 8N3  
 TEL 613-530-3419 • FAX 613-546-5489

## Commercial Credit Application

PROPRIETORSHIP     PARTNERSHIP     CORPORATION

FULL NAME OF BUSINESS:	
ADDRESS:	
	TELEPHONE:
REGISTERED HEAD OFFICE:	
	TELEPHONE:
NUMBER OF YEARS IN BUSINESS:	ANNUAL SALES:
CREDIT LINE REQUESTED:	
BANK:	BRANCH:

TRADE REFERENCES (State Name, Address, and Telephone)	
1.	
2.	
3.	
4.	
5.	

<p><i>The above information is herewith submitted for the purpose of opening an account, and I do hereby certify this information to be true.</i></p> <p><i>I also authorize the above said trade references to disclose credit information to OPS/EZSTAK.</i></p>	SIGNED:
	POSITION:
	DATE:

FOR OFFICIAL USE ONLY		
SALES UNIT:	ORIGINATED BY:	CREDIT APPROVED:
ASSESSMENT:		