

1220 Garrison Road, Fort Erie, Ontario, L2A1P1 Tel: (905) 871-2627 Toll Free: 1-800-842-0421

Date

Fax: (905) 871-4696

Authorised Signature

APPLICANT Information				
Applicant's Name (Exact Legal Business Name):				
Applicant's Daily Business Name:				
Company Address, City, Province, Postal Code:				
Billing Address, City, Province, Postal Code:				
Phone:	Mobile:	Fax:	No. of Locations:	
GST/HST Number:	: Business Established (year/date):			
Number of Employees: Salary:	Full-time:	Part-time:	Seasonal:	Contract:
Company Type: Sole Proprie	torship Partnership	Corporation	Charity/NGO	Government
BANK Information				
Bank/Branch Name:				
Branch Address, City, Province, Postal Code:				
Contact Name:				
Phone:	Fax:	Account Number	er:	
REFERENCE Information				
Contact Name:	Phone:		Email:	
Contact Name:	Phone:		Email:	
Contact Name:	Phone:		Email:	
* IMPORTANT - oral agreements or oral commitments to extend credit, or forbear from enforcing repayment of a debt are not enforceable.				
Terms of Sale: Payments of Employment Professionals Canada's invoices must be made upon receipt of the invoice. Please ensure that your Payables Department has been notified and responds accordingly.				
Applicant authorizes Employment Professionals Canada to conduct inquiries with financial and other agencies for the purpose of qualifying the applicant for a line of credit.				
It is understood that the credit application and action is commenced to collect on any past due in if this occurs the Applicant agrees to pay the cost appropriate court in the Province in which the detalso understand that past due balances may be sagree to pay said charges.	nvoices, the Applicant agrees that Emp of collection, including reasonable leg ot is due and owing and the laws of suc	oloyment Professionals Cana gal fees. The Applicant furthe ch Province shall apply in reg	da shall have the right to brin r agrees that the venue of an gard to any collection proceed	g suit against the Applicant and y suit may be laid in the lings for past due invoices. I/we
By execution of this application, and upon its acceptance by Employment Professionals Canada, the undersigned agrees to be bound by Employment Professionals Canada Terms and Conditions of credit now existing (as printed on this form hereof) and as hereinafter amended. The undersigned also authorizes the above named bank and trade references to release credit information to Employment Professionals Canada relating to this application. It is further agreed and understood that Employment Professionals Canada is authorised by the applicant to obtain and secure credit and/or other information as required by the Credit Bureau, Institutions, Trades, etc. on the business or in the case of a sold, proprietor, or corporation. All information is kept strictly confidential.				

Applicants Name & Title