



7205 Tranmere Drive, Unit # 8, Mississauga, ON. L5S1N4

# Credit Application

## COMPANY INFORMATION

Company Legal Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ (General Contractor, Sub Contractor)

AMOUNT OF CREDIT REQUEST: \$ \_\_\_\_\_ per month

## ACCOUNTS PAYABLE DEPARTMENT

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

## BANK INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## PERSONS AUTHORIZED TO PURCHASE

1. Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell Number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell Number: \_\_\_\_\_

3. Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell Number: \_\_\_\_\_

4. Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Purchase Order Required: Yes: \_\_\_\_\_ or No: \_\_\_\_\_

## PERSONS AUTHORIZED TO PURCHASE

1. Name: \_\_\_\_\_ Contact : \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Contact : \_\_\_\_\_ Phone Number: \_\_\_\_\_

3. Name: \_\_\_\_\_ Contact : \_\_\_\_\_ Phone Number: \_\_\_\_\_

4. Name: \_\_\_\_\_ Contact : \_\_\_\_\_ Phone Number: \_\_\_\_\_



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### PERSONAL INFORMATION

Name: \_\_\_\_\_

Title/ Position: \_\_\_\_\_

Home Address: \_\_\_\_\_

City / Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

### PAYMENT AUTHORIZATION

Credit Card Type: Visa: \_\_\_\_\_ or MasterCard: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name on Card: \_\_\_\_\_ (as it appears on the card.)

I \_\_\_\_\_ Hereby give Paradise Building Supplies Ltd. Authorization to charge full or partial monthly balances or individual invoices to this card.

### TERMS OF SALE

1. Net 30 Days
2. A monthly service fee of 1% (12% per Annum) will be applied to all overdue accounts.
3. Restocking fee of 20% on returned items.
4. Any discrepancies in invoice pricing must be taken up within 30 days of original invoice.
5. I hereby Request credit approval for our company to confirm that the above information is true and that we are in agreement with the Terms and Conditions.
6. I authorize Paradise Building Supplies Ltd. to perform a credit check and verify my credit information.
7. A facsimile or scanned email copy of this credit application shall have the same force and effect as the original

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email application [info@paradisebuildingsuppliesltd.com](mailto:info@paradisebuildingsuppliesltd.com)