

## INCOMPLETE OR INCORRECT APPLICATIONS WILL NOT BE PROCESSED

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## **CREDIT APPLICATION AGREEMENT**

Personal - Page 1 of 2

PERSONAL INFORMAT	ION		Credit Requ	iired:	\$			per month	
First Name:		Initials:	Surname:				Birthdate (M/D/Y):		
Co-Applicant (Spouse)							•	,	
First Name:		Initials:	Surname:		Birthdate (M/D/Y):				
Billing Address:		City: Pro			Province	ce: Postal Code:			
	Telephone N								
Telephone No. (Work):		Telephone No. (Cell):			Telephone No. Spouse (Work):				
Email Address:				Social	Inquirance No	(Spaus)	٠١٠		
Social Insurance No.:				Social	Insurance No	. (Spouse	∌).		
Previous Address (if less than City:	Province:								
	- Contact Do	raan (nat livina	الدوير طائني		FTOVITICE.				
Address of Nearest Relative o	with you):								
City: FINANCIAL INFORMATI		Province:							
Employer (Company Name):	Position:			How Long:					
Previous Employer (if with cur	<i>'</i>				How Long:				
Annual Salary:	Spousal Inc		ome:		No. of Dependents:				
Spouse's Employer (Company Residence:	☐ Board	Position: oard Mortgage/Rent F		ont Dave	ont	How Long: How Long:			
Make & Year of	∐ Own	☐ Rent	Воага		INOT tgage/ Re	ent Payin	ent.	I How Long.	
Automobile:		Province:	Car License No.:		Driver's		s License No. (Copy Attached):		
Make & Year of									
Automobile (Spouse):		Province:	Car License N	0.:	Driver's		s License No. (Copy Attached):		
Bank:	and Address:			City:					
CREDIT REFERENCES									
Creditor Name and Address:	Card No.:		Balance	Due:	Monthly Payments:				
Creditor Name and Address:	Card No.:		Balance	Due:	Monthly Payments:				
Creditor Name and Address:	Card No.:		Balance	Due:	Monthly Payments:				
Creditor Name and Address:	Card No.:			Balance		Monthly Payments:			
						l			
Site Address:			Citv:			Lot #:		Plan #:	



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JOINT APPLICANTS OR AU	THORIZED USE	RS								
First Name:	Initials:	Surname:		Birth Date (M/D/Y):						
Address:		Social Insurance No.:								
Employer Name, Address and Tele	phone No.:		Position:	How Long:						
Annual Salary:	Relationship to Ap	plicant:	Joint Applicant or Auth	Authorized User:		Card Required?				
First Name: Initials:		Surname:		Birth Date (M/D/Y):						
Address:			Social Insurance No.:							
Employer Name, Address and Tele	phone No.:		Position: How Long:							
Annual Salary:	Relationship to Ap	plicant:	Joint Applicant or Auth	orized User:		Card Required?				
SPECIAL TERMS										
<ol> <li>Service charges on a FER on any overdue amounts.</li> </ol>	RELL BUILDERS' SU	IPPLY LTD. perso	onal credit account are a	pplied at 2%	per month (2	4% per annum)				
CUSTOMER AGREEMENT										
may supply me/us. I/We p thereof, that you may rene securities as you may thin this personal guarantee sh  2) The undersigned hereby ac changes that pertain to thi  3) The applicant agrees that copy of this agreement.  4) Any and all third party coll 5) If your account matter is n be charged to this accoun  6) The undersigned agrees th Ferrell Builders' Supply Ltd according to the laws of th  7) FERRELL BUILDERS' SUP  8) All returned cheques will b 9) Credit Card payments on a	ew such notes or any k proper, without les hall continue to be bit grees to notify FERR is agreement.  If axed or emailed copection/legal fees will eferred to counsel at the situs of the column and the undersigned the Province of Ontari PLY LTD. reserves of e charged a minimum account are not accee.	part thereof, ma sening or affectirending, and shall executed the second of this credit be the responsible of the responsible of statement of the second shall be determed on the second of the responsible of the second of the responsible of the second of	y compromise its liability of your rights against mensure to the benefit of <b>F SUPPLY LTD</b> . in writing capplication agreement sility of the company/ perfocaim is issued, a minimal before the courts in materials sold until invoice service fee.	to you, and elus. And I/verence And I/verenc	exercise or r we declare an ILDERS' SUP name change same force a credit. tration charge legal proceedi Ontario in full.	elinquish other d agree that PLY LTD. or any other and validity as the true e of \$500 plus HST will ing between				
The undersigned hereby requests of SUPPLY LTD. and any such finance the above information is true and a	cial and/or credit inst	itution deemed ap	propriate to obtain such	credit inform s.						
Applicant's Name:	Applicant's Name:			Signature:						
Joint Applicant's Name:		Date:	Signature:							
Joint Applicant's Name:			Date:	Signature:						
Joint Applicant's Name: Date: Signature:										
In witness of whereof of the Pa	<u>irties h</u> ereto have l	nerunto set the	r hands.							
WITNESSES										
Print Name:		Date:	Signature:	Signature:						
Print Name:			Date:	Signature:						