

INCOMPLETE OR INCORRECT APPLICATIONS WILL NOT BE PROCESSED



CREDIT APPLICATION AGREEMENT

Personal - Page 1 of 2

PERSONAL INFORMAT	ION		Credit Requ	ired:	\$			per month
First Name:		Initials:	Surname:				Birthdate (M	/D/Y):
Co-Applicant (Spouse)								·
First Name:		Initials:	Surname:			Birthdate (M/D/Y):		
Billing Address:		City: Provin			Province	e:	Postal Code:	
Telephone No. (Work):	Telephone N	No. (Home):		Telephone No. (Cell):		Telephone No. Spouse (Work):		
Email Address:								
Social Insurance No.:				Social Insurance No. (Spouse):			e):	
Previous Address (if less than	one year at p	resent address)):					
City:		Province:						
Address of Nearest Relative or	Contact Pers	son (not living w	vith you):					
City:		Province:						
FINANCIAL INFORMATI	ON							
Employer (Company Name):		Position:				How Long:		
Previous Employer (if with curr	/ear):	Position:				How Long:		
Annual Salary:	Other Income:			Spousal Income:			No. of Dependents:	
Spouse's Employer (Company	Position:			How Long:				
Residence:	Own	Rent	☐ Board		Mortgage/R	ent Paym	ent:	How Long:
Make & Year of Automobile:		Province:	Car License N	0.:		Driver's	License No.	(Copy Attached):
Make & Year of Automobile (Spouse):		Province:	Car License No.:			Driver's License No. (Copy Attached):		
Bank: Branch Name a			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	Due:	Monthly Payments:			
Site Address:			Citv:			I ot #:		Plan #:



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					Personal - Page 2 of 2					
TAPPLICANTS (OR AUTHORIZED U	ISERS								
ame:	Initials:	Surname:			Birth Date (M/D/Y):					
s:				Social Insur	Social Insurance No.:					
ver Name Address a	nd Telephone No :			Position:	How Long:					
		A nalicenti	Joint Applicant	I						
			Joint Applicant	or Authorized Oser.	Card Required?					
ame:	Initials:	Surname:			Birth Date (M/D/Y):					
S:				Social Insur	ance No.:					
ver Name, Address a	nd Telephone No.:			Position:	How Long:					
		Applicant:	oplicant: Joint Applicant or A		Card Required?					
		C' CUDDIVITO	norganal aradit assa	unt are applied at 20/	nor month (240/ nor annum)					
OMER AGREEM	IENT									
may supply me/us. thereof, that you ma securities as you m this personal guara The undersigned he	I/We personally agree to any renew such notes or a ay think proper, without nate shall continue to be be agreedy agrees to notify FE	hat you may according part thereof, lessening or affect binding, and sha	ept my/our notes or a may compromise its cting your rights again all ensure to the bene	cceptance for the price liability to you, and exe nst me/us. And I/we defit of FERRELL BUIL	e of such goods or any part ercise or relinquish other eclare and agree that DERS' SUPPLY LTD.					
copy of this agreem Any and all third pa If your account mat be charged to this a The undersigned ag Ferrell Builders' Sul according to the law FERRELL BUILDE All returned cheque	nent. rty collection/legal fees we ter is referred to counsel account. grees that the situs of the pply Ltd. and the unders we of the Province of One RS' SUPPLY LTD. reserts will be charged a minimum of the province of one of the province of One RS' SUPPLY LTD.	will be the respond and or statemer e credit account signed shall be detario. I we ownership owner ship owner should be tario.	nsibility of the comparent of claim is issued, a shall be Hamilton, On etermined before the of the materials sold ut HST service fee.	ny/ person seeking cre a minimum administrat tario and that any lega courts in Hamilton, On	dit. ion charge of \$300 plus HST will al proceeding between tario					
Y LTD. and any such	n financial and/or credit i	nstitution deeme	d appropriate to obta	in such credit informat						
ınt's Name:			Date:	Signature:						
pplicant's Name:			Date:	Signature:						
Joint Applicant's Name:			Date:	Signature:						
Joint Applicant's Name:			Date:	Signature:						
	he Parties hereto have	e herunto set th	eir hands.							
ame: ame:			Date:	Signature: Signature:						
	er Name, Address and Salary: EIAL TERMS Service charges on on any overdue amms on any overdue amms on any overdue amms ecurities as you megalities as you	rer Name, Address and Telephone No.: Salary: Relationship to Initials: Rer Name, Address and Telephone No.: Relationship to Initials: Rer Name, Address and Telephone No.: Salary: Relationship to Rela	rer Name, Address and Telephone No.: Salary: Relationship to Applicant: Initials: Surname: S: Rer Name, Address and Telephone No.: Salary: Relationship to Applicant: Relationship to Applicant: IAL TERMS Service charges on a FERRELL BUILDERS' SUPPLY LTD. on any overdue amounts. OMER AGREEMENT I/We hereby (jointly and severally) personally guarantee pay may supply me/us. I/We personally agree that you may accuthereof, that you may renew such notes or any part thereof, securities as you may think proper, without lessening or affethis personal guarantee shall continue to be binding, and shall be deaded to this agreement. The applicant agrees that faxed or emailed copies of this crecopy of this agreement. Any and all third party collection/legal fees will be the resport of your account matter is referred to counsel and or statemer be charged to this account. The undersigned agrees that the situs of the credit account of the laws of the Province of Ontario. FERRELL BUILDERS' SUPPLY LTD. reserves ownership of All returned cheques will be charged a minimum of \$50 plus (CANT/PERSONAL GUARANTORS & CO-APPLI dersigned hereby requests credit approval for the above ment of YLTD. and any such financial and/or credit institution deemed to the province of the province of the above ment of the province of the province of the above ment of the province of the province of the above ment of the province of the province of the above ment of the province of the prov	rer Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant: Initials: Surname: Serior Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant: Serior Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant: Initials: Surname: Serior Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant: Initials: Joint Applicant: Initials: Surname: Service charges on a FERRELL BUILDERS' SUPPLY LTD. personal credit accoon any overdue amounts. OMER AGREMENT I/We hereby (jointly and severally) personally guarantee payment to FERRELL Bursupply me/us. I/We personally agree that you may accept my/our notes or a thereof, that you may renew such notes or any part thereof, may compromise its securities as you may think proper, without lessening or affecting your rights again this personal guarantee shall continue to be binding, and shall ensure to the benefit of the personal payment of the payment of the personal payment of the personal payment of the personal payment of the payment of the personal payment of the personal payment of the personal payment of the payment of the personal payment of the payment of the payment of the payme	ser Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant or Authorized User: Initials: Surname: Initials: Surname: Social Insur For Name, Address and Telephone No.: Salary: Relationship to Applicant: Joint Applicant or Authorized User: Salary: Relationship to Applicant: Joint Applicant or Authorized User: Joint Applicant or Authoriz					