

INCOMPLETE OR INCORRECT APPLICATIONS WILL NOT BE PROCESSED

CREDIT APPLICATION AGREEMENT

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PERSONAL INFORMATIO	Credit Required: \$				per month				
First Name:	Initials:		Surname:			Birthdate (M/D/Y):			
Co-Applicant (Spouse)			Sumano.						
First Name:		Initials:	Surname:			Birthdate (M/D/Y):			
					Drawing				
Billing Address:		City:		Provinc	Mince. Fostal Code.				
Telephone No. (Work):	Telephone N	lo. (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 present address):									
City:			Province:						
Address of Nearest Relative or	Contact Per	rson (not living	with you):						
City:	Province:								
FINANCIAL INFORMATIO	ON								
Employer (Company Name):	Position:			How Long:					
Previous Employer (if with curre	vear): Position:				How Long:				
Annual Salary: Other Income					Spousal Inc	come:		No. of Dependents:	
Spouse's Employer (Company N	Position:				How Long:				
Residence:	Own	Rent	Board		Mortgage/Re	ent Payn	nent:	How Long:	
Make & Year of Automobile:		Province:	Car License No	D.:		Driver's	License No.	(Copy Attached):	
Make & Year of Automobile (Spouse): Prov		Province:	Car License No.:			Driver's License No. (Copy Attached):			
Bank: Branch Name a			and Address:		City:				
CREDIT REFERENCES						ý			
Creditor Name and Address:			Card No.:		Balance	e Due:	Monthly Payments:		
Creditor Name and Address:			Card No.:		Balance		Monthly Payments:		
orealitor marrie and Address.			Dalaille		monthly rayments.				
Creditor Name and Address:			Card No.:		Balance	e Due:	Monthly Payments:		
Creditor Name and Address:			Card No.:		Balance	e Due:	Monthly Payments:		
Site Address:			City:		Lot #:		Plan #:		



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JOINT	APPLICANTS OR AU	THORIZED USE	RS						
First Na	ime:	Initials:	Surname:	Birth Date (M/D/Y):					
Address:						Social Insurance No.:			
Employer Name, Address and Telephone No.:							How Long:		
Annual		Relationship to Ap					Card Required?		
				Joint Applicant or Auth					
First Na		Initials: Surname:			Birth Date (M/D/Y):				
Address	3:			Social Insur	ance No.:				
Employ	er Name, Address and Tele	hone No.:			Position:		How Long:		
Annual	Salary: IAL TERMS	Relationship to Ap	oplicant:	Joint Applicant or Auth	orized User:		Card Required?		
 Service charges on a FERRELL BUILDERS' SUPPLY LTD. personal credit account are applied at 2% per month (24% per annum) on any overdue amounts. CUSTOMER AGREEMENT I/We hereby (jointly and severally) personally guarantee payment to FERRELL BUILDERS' SUPPLY LTD. for all goods which you may supply me/us. I/We personally agree that you may accept my/our notes or acceptance for the price of such goods or any part thereof, that you may renew such notes or any part thereof, may compromise its liability to you, and exercise or relinquish other securities as you may think proper, without lessening or affecting your rights against me/us. And I/we declare and agree that this personal guarantee shall continue to be binding, and shall ensure to the benefit of FERRELL BUILDERS' SUPPLY LTD. The undersigned hereby agrees to notify FERRELL BUILDERS' SUPPLY LTD. in writing of any legal name change or any other changes that pertain to this agreement. The applicant agrees that faxed or emailed copies of this credit application agreement shall have the same force and validity as the true copy of this agreement. Any and all third party collection/legal fees will be the responsibility of the company/ person seeking credit. If your account matter is referred to counsel and or statement of claim is issued, a minimum administration charge of \$500 plus HST will be charged to this account. The undersigned agrees that the situs of the credit account shall be Hamilton, Ontario and that any legal proceeding between Ferrell Builders' Supply LtD. The undersigned shall be determined before the courts in Hamilton, Ontario according to the laws of the Province of Ontario. FERRELL BUILDERS' SUPPLY LTD. reserves ownership of the materials sold until invoices are paid in full. 									
9)	 All returned cheques will be charged a minimum of \$50 plus HST service fee. Credit Card payments on account are not accepted by Ferrell unless Applicant agrees to add 3% Processing Fee by sigining below. 								
APPL	CANT/PERSONAL GU	JARANTORS &	CO-APPLICA	NTS:					
The undersigned hereby requests credit approval for the above mentioned applicant; consents and authorizes FERRELL BUILDERS' SUPPLY LTD. and any such financial and/or credit institution deemed appropriate to obtain such credit information as required; and confirm the above information is true and agrees to be bound by the aforementioned terms and conditions.									
Applica	nt's Name:			Date:	Signature:				
Joint Applicant's Name:				Date:	Signature:				
Joint A	Joint Applicant's Name:			Date:	Signature:				
Joint A	oplicant's Name:			Date:	Signature:				
In witness of whereof of the Parties hereto have herunto set their hands. WITNESSES									
Print Na				Date:	Signature: Signature:				