



5303-75 Street  
Edmonton, AB  
T6E 5S5

Tel: 780-481-1122  
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**CREDIT APPLICATION**

Legal Name of Firm: \_\_\_\_\_

Shipping Address: \_\_\_\_\_  
Address City Province Postal Code

Billing Address: \_\_\_\_\_  
Address City Province Postal Code

Phone Number: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Fax Number: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Yr. Commence: \_\_\_\_\_

Individual Authorized to Purchase Goods & Services for Company: \_\_\_\_\_

Business Registered As:  Corporation  Partnership  Proprietorship

IRS Number (USA Only): \_\_\_\_\_ G.S.T Number (Canada Only): \_\_\_\_\_

Principals, Owners, or Directors:

Name	Home Address	Position
_____	_____	_____
_____	_____	_____

Accounts Payable Contact: \_\_\_\_\_ Phone Number: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_

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

Credit Required: \_\_\_\_\_ P.O. Req.  Yes or  No Stmt. Req.  Yes or  No Business Number: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Credit References: Please provide 4 companies in which you have ongoing accounts with and ensure the information is completed in full.

**Please Note – Banks, Gas, Bulk Fuel Companies, and Personal References cannot be used.**

Company Name:	Address:	Phone#:	Fax#:
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____

hereby agree to pay same on or before the 30<sup>th</sup> day of the month following purchase and to pay interest on any balance not so paid at the rate of **24%** per annum until paid. Our terms are **Net 30 Days**.

I hereby authorize Titan Supply Inc. to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a Credit Account or for any other direct business requirement. This consent is given pursuant to Section 12 of the Personal Information Reporting Act.

**(ALL APPLICATIONS MUST BE SIGNED TO BE CONSIDERED)**

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_

For Office Use Only

Salesman: \_\_\_\_\_  
Branch: \_\_\_\_\_  
Region: \_\_\_\_\_

Date: \_\_\_\_\_  
Industry Code: \_\_\_\_\_  
Potential Annual Sales: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

