



## Credit Application

### Business contact information

**Company name:**

Phone:	Fax:	AP e-mail:
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Address:

City:	Province:	Postal code:
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Nature of business:

Years in business:

Accounts Payable contact:

Corporation:	Partnership:	Proprietorship:	Other:
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### Bank Reference

**Bank name:**

Branch:	Province:	Postal code:
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Phone:	Fax:	Account #:
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Account Manager:

G.S.T:	PO required:
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### Business/trade references

<b>Company name:</b>	<b>Company name:</b>
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Address:	Address:
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City:	Postal code:	City:	Postal code:
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Phone:	Phone:
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Fax:	Fax:
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E-mail:	E-mail:
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<b>Company name:</b>	<b>Company name:</b>
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Address:	Address:
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City:	Postal code:	City:	Postal code:
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Phone:	Phone:
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Fax:	Fax:
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E-mail:	E-mail:
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### Terms & Conditions:

The following terms apply to all amounts invoiced by RKM Crane Services Ltd.:

- 1) All sales are to be paid within 30 days of date of Invoice.
- 2) Interest at the rate of 2% per month (26.82% Annual) will be applied to all amounts owing 30 days after the invoice date.
- 3) All cheques returned by the bank are subject to a \$25 service charge.

The signer is authorized to, and does authorize RKM Crane Services Ltd. to make any credit investigation of the applicant as RKM Crane Services Ltd. deems necessary. The signer further authorizes any bank or firm to divulge such information to RKM Crane Services Ltd. The signer hereby certifies that the information contained herein is complete and accurate. This information has been furnished with understanding that it is to be used to determine the amount and conditions of the credit to be extended.

### Signatures

**Title:**

**Signature:**

**Date:**

**Name (Print):**

\*\*\* Once completed, please send to [ar@rkmcrane.com](mailto:ar@rkmcrane.com)\*\*\*