

EASTERN FOUNDRY & FITTINGS INC
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E-MAIL: william@eff-fitting.com WEBSITE: www.eff-fitting.com

CREDIT APPLICATION FORM

Cus	stomer Informati	ion			
Con	mpany Name:				_
Add	lress:				
City:		Province:		Postal Code:	
E-mail:		Tel:		Fax:	_
Type of Business:			Retail Sales Tax #		_
Year in Business:		Requested	l Monthly Credit:		
Bank Information					
Bank Name:				Branch No:	
Address:					
Telephone No.		Fax No			
Contact Person:					
Trade Reference					
	Со	mpany Name	Contact Person	n Fax Number	7
1					
2					
3					
I the undersigned Acknowledge that the terms of payment to Eastern Foundry & Fitting LLC. are net within 30 days and understand clearly the terms and conditions of sale. Outstanding invoices will be charged 2 % interest per month. Customer agrees Eastern Foundry & Fitting LLC. to obtain credit information about the customer at any time from any credit bureau.					
Signature:			Date:		
Print Your Name:			Title:		_
For Office Use Only					
Effective Date:			Authorized By	7:]