



CREDIT APPLICATION

448 Industrial Ave East. Penticton, BC V2A 3J1
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E-Mail : josh.bbfd@shawbiz.ca

BUSINESS NAME: _____		Nature of Business: _____
CONTACT NAME(S): _____	Position: _____	How long in Business: _____
PHONE: Work () _____		Driver's License Number: _____
Res. () _____		Date of Birth: _____
Fax () _____		
EMAIL ADDRESS: _____	Would you prefer to receive your bills via Email? _____	
MAILING ADDRESS: _____	Physical Address (If Different) _____	

TRADE REFERENCES (Please no Bank or Credit Card)

Trade References: _____	phone: _____	fax: _____
_____	phone: _____	fax: _____
_____	phone: _____	fax: _____
Personal References: _____	phone: _____	
_____	phone: _____	

Credit Card Number: _____ Exp. _____

How Many Cards do you require? _____ Pin #'s _____

Would you like us to automatically clear your account to credit card at the end of each billing period? _____

Our Card Readers work by either swiping the card through the reader, or by manually keying in the card number. Which method would you prefer? Or would you prefer Both?

TERMS

The applicant agrees to make payment by the 25th of the month following the purchase of goods for which credit is extended by BBFD, to the applicant and further agrees that if payment is defaulted more than once the unpaid balance shall bear compound interest at the rate of 2% per month effective the first day of the month following extension of credit until paid in full. Also let it be known that there will be a surcharge of twenty-five (\$25.00) dollars on any returned or NSF cheques. The applicant authorizes BBFD to obtain such credit reports or other information as the BBFD may deem necessary for any direct business requirement.

Signed: _____ Dated: _____

For Office Use Only: Lube Group _____ Fuel Group _____