



Credit Application – Please Print Clearly

Legal Name and Billing Address:

Ship To Address (if different):

Telephone # _____

Fax #. _____

Name(s) of Principal(s) & Title(s):

Name: _____

Title _____

Name: _____

Title _____

Identify Ownership Structure: Proprietorship Partnership Corporation

Date Company Established: _____

Accounts Payable Contact: _____

Telephone # _____

Email address _____

Bank Reference	Address	Contact /Title	Tel/Fax
Trade References (3)	Address	Contact /Title	Tel/Fax
1.			
2.			
3.			

I certify that the facts contained herein are correct to the best of my knowledge & we agree to pay all invoices within terms granted to prevent termination of credit.

Authorized Signature: _____ Title: _____ Date: _____

Comments:

OFFICE USE ONLY

Credit Manager Approval: _____ Date: _____

Credit Limit \$: _____

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