



A&L Auto Recyclers Inc.
APPLICATION FOR CREDIT

Type of Application: New Credit Reinstatement/Renewal Increase of Credit Limit

Name of Business: _____

Street Address: _____ Phone: _____

City/Town: _____ Province: _____ Fax: _____

Mailing Address: _____ Postal Code: _____

HST No. _____ Corporate No. _____

Type of Business: (CIRCLE ONE) *Partnership Corporation** Sole Proprietorship*

****Corporations, what is the name of the person(s) responsible for guaranteeing payment of the account:**

Name: _____ Phone: _____

Name of Principal/Partner: _____ Phone: _____

Home Address: _____ Postal Code: _____

Name of Principal/Partner: _____ Phone: _____

Home Address: _____ Postal Code: _____

Identification of Principals/Partners (i.e. driver's licence, credit card, etc.)

Date Business Commenced/Years in business: _____

Business Bank: _____ Branch: _____

Phone: _____ Contact: _____

Supplier References- List 3 businesses and all of their information in which you currently have a charge account.

Business Name	Business Contact	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Estimated amount (\$) of credit required: _____

Persons authorized to sign for pick-ups and deliveries:

Name 1: _____ Name 2: _____

Name of Accounts Payable Manager: _____ **Phone:** _____

The undersigned, in consideration of the granting of credit, to the above optioned customer, be it a sole proprietor, partnership or limited corporation (hereinafter referred to as the customer), does hereby guarantee payment to A & L Auto Recyclers Inc. of all debt and liabilities which the customer has incurred or may incur with A & L Auto Recycles Inc., including without limitation those in respect of business transaction between the customer and A & L Auto Recyclers Inc., as well as any other transactions by which the customer may become liable to A & L Auto Recyclers in any manner whatsoever.

Witness: _____ **Guarantor:** _____
Print Name: Print Name:

AGREEMENT: I/We agree to pay the balance owing on receipt of monthly statements, and to pay in full within 30days. A service charge will apply to statements with a balance outstanding as of the last day of the following month, calculated at 2 per cent per month (being 24 per cent per annum). I/We consent to the obtaining of such information as may be required from time to time in connection with the credit applied for or for a renewal or extension thereof and to the disclosure of any credit information to any credit reporting agency or person with who the undersigned has financial relations.

Print Name:

Signature:

