



Edmonton Exchanger & Manufacturing Ltd.

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Credit Application

Company Information

Company name: _____
 Invoice Address: _____

 Type of business: _____
 Corporation / Other: _____
 In operation since: _____ Credit amount requested: _____
 Federal ID number: _____ \$ _____

Contact Information

Buyer
 Name: _____ Email: _____
 Phone: _____ Fax: _____
Accounts Payable
 Name: _____ Email: _____
 Phone: _____ Fax: _____

Principal Owners

Name	Title
1 _____	_____
2 _____	_____
3 _____	_____

Banking Information

Name of Bank: _____ Contact: _____
 Bank address: _____ Account #: _____

Credit References

Name	Address	Telephone #
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Credit Terms - Net 30 days

Officer's name: _____ Signature: _____
 Title: _____ Date: _____