

INTER-OFFICE USE ONLY	APPROVED:	NOT APPROVED:	CREDIT LIMIT:
	APPROVED BY:	DATE:	

Aprons 'n More Inc. 164 Needham Street, Lindsay, ON K9V 5R7
ASI/ 36563 PPAC/ 970109
Tel: (705) 324-0810 Fax: (705) 324-0409 / Alternate Fax: (705)324-0830

Please complete & return this credit application so that we may set up an account for your future ordering convenience.

CREDIT APPLICATION

Request Date: _____

Legal Co. Name _____
Trade Name: _____

Invoice Address: _____ **Date Business Established:** _____
 _____ **ASI #** _____
 _____ **PPAC #** _____

Ship Address: _____

Officers of the Company: President: _____
 Purchasing Agent: _____
 Accounts Payable: _____

Telephone No. _____ **Fed. Tax I.D. #** _____
Fax No. _____

Credit References	COMPLETE NAME & ADDRESS(incl. zip code)	PHONE NO.	FAX NO.
1)	_____	_____	_____
	Contact: _____	_____	_____
2)	_____	_____	_____
	Contact: _____	_____	_____
3)	_____	_____	_____
	Contact: _____	_____	_____
4)	_____	_____	_____
	Contact: _____	_____	_____
5)	_____	_____	_____
	Contact: _____	_____	_____

Bank Reference: Name: _____
 Address: _____
 Tel. No. # _____ **Manager:** _____

Signature of Authorized Officer: _____

 Signature Print Name

Please complete all sections. Incomplete applications will NOT be processed.