

Tunnel Vision Trenchless Services Inc
127 EARL THOMPSON PLACE

AYR ONTARIO N0B 1E0

519-279-2955

accounting@tunnelvisions.ca

Credit Application for Business Account with TVTS INC

BUSINESS CONTACT INFORMATION

Title		Date business commenced	
Company name		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	
Phone Fax			
E-mail			
Registered company address City, Province Code			

BUSINESS AND CREDIT INFORMATION

City, Province, Postal Code		Bank name:	
How long at current address?		Primary business address City, Province, Postal Code	
Phone		Phone	
Fax		Account number	
E-mail		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, Province, Postal Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, Province, Postal Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, Province, Postal Code		E-mail	
Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other	Other	

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Tunnel Vision Trenchless Services Inc to make inquiries into the banking and business/trade references that you have supplied, as well as any other trade related suppliers, contractors, or credit groups.

SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	