LEGACY SIGNS & GRAPHICS LTD

Date Approved:

800 96th Ave, Dawson Creek, B.C., V1G 1K7 Phone: 250.782.2528 | Fax: 250.782.2530 Email: admin@legacysignsandgraphics.com

Terms:

gnsandgraphics.com GST: 738119890

CONFIDENTIAL -	Account/Credit Ap	plication						
New Customer:		Existing Customer	r:		Credit amount requested:			
BUSINESS INFOR	MATION							
	orporate Name:			Pŀ	none Number:			
	Trade Name:			ł	Cell Number:			
	Address/City:				Fax Number:			
	Province:	Postal Code:		E	mail Address:			
Key (Contact Name:	Title:		(GST Number:			
	Email Address:	•		1				
Secondary E	Email Address:							
					•			
Type of Company	Sole Proprietorship:		Corporation:		•	Co-operati		
	Partnership:		Government:		,	Other-Speci	fy:	
	AL/SHAREHOLDE							
Name:		Address:			Phone #:	Title:		
BANKING INFOR	MATION							
Name of Bank:	MATION		Contact					
Address:			Contact:	<u> </u>				
City:			Province:			Phone #:		
Account Number:			Postal Code:		r	Fax #:		
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BUSINESS AND/O	R TRADE INFORM	ATION						
Company Name:	It HUIDE II (I OIL)		Contact:					
Address:			Contact.	L				
City:			Province:			Phone #:		
Phone Number:			Postal Code:			Fax #:		
Email:			T obtain code.			1 437 77		
Type of Account:								
Company Name:			Contact:					
Address:								
City:			Province:		P	Phone #:		
Phone Number:			Postal Code:			Fax #:		
Email:								
Type of Account:								
Company Name:			Contact:					
Address:								
City:			Province:		P	Phone #:		
Phone Number:			Postal Code:			Fax #:		
Email:								
Type of Account:								
CDEDIT TEDMS	AND CONDITIONS							
		1: 6		11.1.1	1: 16		1 6 1.	
	-	personal information as may be re-	-					
•	•	istomer to any credit reporting ago agreed upon by Legacy Signs & C						
		verdue accounts from the date such						
		td reserves the right to cancel the						
-		nd hereby agree to abide by these			-	-		
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Authorized Signature:				Title:				
				Date:				
OFFICE LIGE ON	X 7							
OFFICE USE ONL		A 1	(V/N-).		0.1	4 T ::4.		
Date Received:	Ī	Approved	res/No):		Credi	it Limit:		

Approved by: