

APPLICATION FOR CHARGE ACCOUNT

786 Limousine Services +1 (604) 600-8511 786 limousine services@gmail.com		
Name of Firm	Date	
Street Address		
City	Province	Postal Code
Telephone#	Fax #	
Name of Partners and/or Officers		Tilte
Email 1		
Email 2		
Number of Years in Business		Nature of Business
	Include Automatic	Gratuity Amount
CREDIT REQUESTED: \$	Gratuity? Y N	\$%
Name of Bank Branch		
Telephone # Fax #		Account #
If your bank is not a chartered bank we require the account to be guaranteed by a major credit card. If your bank is not a chartered bank we require the account to be guaranteed by a major credit card. Image: Credit Card # Image: Credit Card # Image: Name on Card		
Supplier Reference - Please complete all sections:		
Name Addition 1. 1.	ldress	Phone #
2.		
3.		
Affiliated with other Companies?		
Accounts Payable Contact		
TERMS OF PAYMENT It is understood that accounts are due within 30 days following the date of invoice. Overdue accounts are subject to suspention without prior notification. Please a in you subet and undistinite peris or paymen. Initial here I hereby authorize 786 Limousine to whom this application is submitted to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for and other direct business requirement. This consent is given pursuant to Section 12 of Credit Reporting Act, R.S.B.C.		
Signed per Print Name Signa	ture	Position