



CWS INDUSTRIES (MFG) CORP.

NAME OF CUSTOMER: _____

ADDRESS: _____

CORPORATION: _____

PARTNERSHIP: _____

INDIVIDUAL: _____

OTHER (Please Specify): _____

SHIPPING ADDRESS (If different from above): _____

NATURE OF BUSINESS: _____

YEARS OF ESTABLISHED: _____

G.S.T. Reg. No. _____

P.S.T.Reg. No. _____

TELEPHONE: _____

FAX: _____

PURCHASE ORDERS REQUIRED? _____

CREDIT REQUESTED \$ _____

PRINCIPALS OF COMPANY

NAME: _____

TITLE: _____

NAME: _____

TITLE: _____

NAME: _____

TITLE: _____

NAME OF BANK: _____

CONTACT: _____

BRANCH: _____

PHONE: _____

CREDIT REFERENCES:

NAME: _____

PHONE: _____

FAX: _____

NAME: _____

PHONE: _____

FAX: _____

NAME: _____

PHONE: _____

FAX: _____

I hereby apply to CWS Industries (Mfg) Corp. for a credit account. I warrant that the information shown here is true and that the information given is for the purpose of obtaining goods on credit. I hearby authorize the person of the firm to whom this application is made, any credit bureau of other investigate agency employed by such persons, to investigate the references herein listed, or statements, or other data obtained from any other person pertaining to my credit or financial responsibility.

Date: _____ Signature: _____ Title: _____