



Sales Rep: _____ E-mail to: accounting@celplast.com

CREDIT APPLICATION BUSINESS INFORMATION

Legal Business Name: _____

Trade Name(s): _____

Mailing Address: _____

Shipping Address: _____

Telephone: _____ Facsimile: _____

Employees: _____ Year of Establishment: _____ Parent Company (if appl.): _____

Corporation: _____ Partnership: _____ Sole Proprietor: _____ Other: _____

Name(s) of Proprietor or Officer: _____

Accounts Payable Contact Name: _____ E-mail: _____

Telephone number and/or Extension: _____ ext. _____ Facsimile: _____

Purchasing Agent Contact Name: _____ E-mail: _____

Telephone number and/or Extension: _____ ext. _____ Facsimile: _____

HST/ QST #: _____

Tax ID Number (IRS #): _____

BANK REFERENCE

Bank Name: _____ Account Manager: _____

Account #: _____ Telephone: _____ ext. _____

Transit/Branch #: _____ Facsimile: _____

E-mail: _____

TRADE REFERENCES

*No Transport Companies are applicable as references

Company: _____ E-mail: _____

Telephone: _____ ext. _____ Facsimile: _____

Products and/or Services Provided: _____

Company: _____ E-mail: _____

Telephone: _____ ext. _____ Facsimile: _____

Products and/or Services Provided: _____

Company: _____ E-mail: _____

Telephone: _____ ext. _____ Facsimile: _____

Products and/or Services Provided: _____

Authorization (Name) : _____

The above (Person) authorizes Celplast Metallized Products Ltd. to obtain credit information from the given references.

Would you like to receive future communications from Celplast? Select all that apply.

Product News and Updates:

Events notification:

Packaging Insights Newsletter: