



6311 VIPOND DRIVE, MISSISSAUGA, ON L5T 1T7 (905) 564-2227

## CREDIT APPLICATION

### BUSINESS

Name: \_\_\_\_\_ Credit requested: \$ \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### DIRECTORS

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

### FINANCIAL INSTITUTION

Name: \_\_\_\_\_ Bank Contact: \_\_\_\_\_ Ext: \_\_\_\_\_

Bank Transit # \_\_\_\_\_ Bank Account # \_\_\_\_\_ Phone: \_\_\_\_\_

### TRADE REFERENCES (Door related)

NAME	PHONE	CREDIT DEPARTMENT EMAIL
1: _____	_____	_____
2: _____	_____	_____
3: _____	_____	_____
4: _____	_____	_____
5: _____	_____	_____

### SALES CONDITIONS

- 1: It is understood that the customer will pay Lynx Industries Inc. 1% 10 days/net 30 days from the invoicing/shipping date.
- 2: Lynx Industries Inc. reserves the right to establish and/or modify the credit line.
- 3: I authorize Lynx Industries the right to obtain all necessary information from financial and trade references supplied in this application. This authorization also applies to periodical updating of this credit application.
- 4: The parties agree that every sale is subject to the law of the province of Ontario and that any/all litigation will be submitted to the jurisdiction of the courts in the judicial district of Toronto.

The customer acknowledges and accepts these conditions by signing below

SIGNATURE (Authorized Representative): \_\_\_\_\_

The undersigned jointly, severally and unconditionally guarantees payment of all amounts due to Lynx Industries Inc. by the customer and renounces to the benefit of discussion or division.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE SIGN AND RETURN THIS FORM TO: [c.glidden@lynx-nsw.com](mailto:c.glidden@lynx-nsw.com) or by fax to: (905) 670-0806