



**CREDIT APPLICATION & NEW ACCOUNT FORM**

ACCOUNT NAME: \_\_\_\_\_

**MAILING ADDRESS:**

Street: \_\_\_\_\_

City / Town: \_\_\_\_\_ Prov. / State: \_\_\_\_\_ Postal / Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Financial Officer: \_\_\_\_\_

**BUSINESS INFORMATION**

New Company / Organization: \_\_\_\_\_

Private Ownership: \_\_\_\_\_

Limited Company: \_\_\_\_\_

Partnership: \_\_\_\_\_

Years in Business under present ownership: \_\_\_\_

Previous Company Name (if new) \_\_\_\_\_

Previous Address (if new): \_\_\_\_\_

**NAMES OF PRINCIPAL OWNERS:**

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

**OTHER COMPANIES ASSOCIATED WITH THIS COMPANY:**

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to this Company: \_\_\_\_\_

**TRADE REFERENCES:**

- 1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax Number : \_\_\_\_\_
- 2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_
- 3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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**BANKING**

NAME OF BANK (CREDIT UNION): \_\_\_\_\_  
BRANCH: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ POSITION: \_\_\_\_\_  
TELEPHONE NUMBER : \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

**TERMS:**

THE HOLIDAY INN HOTEL & SUITES, NORTH VANCOUVER TERMS OF SALE TO APPROVE CREDIT ACCOUNT ARE PAYMENT ON RECEIPT OF INVOICE. INTEREST OF 2% PER MONTH ON OVERDUE BALANCES IS CHARGED. INTEREST RATE MAY BE ADJUSTED FROM TIME TO TIME TO REFLECT ECONOMIC CONDITIONS.

I / WE HEREBY STATE THAT THE INFORMATION GIVE IS CORRECT TO THE BEST OF MY / OUR KNOWLEDGE AND AGREE TO COMPLY / ACCEPT THE TERMS AS STATED.

SIGNATURE: \_\_\_\_\_ POSITION: \_\_\_\_\_  
DATE: \_\_\_\_\_

**CONSENT CLAUSE**

I/WE HEREBY AUTHORIZE HOLIDAY INN HOTEL & SUITES NORTH VANCOUVER 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 ANY OTHER DIRECT BUSINESS REQUIREMENT.

SIGNATURE: \_\_\_\_\_ POSITION: \_\_\_\_\_  
DATE: \_\_\_\_\_