



"PROPANE - SALES, SERVICE"

4255 - 64 Avenue S.E.
Calgary, AB T2C 2C8
Phone: 403 279 4777 Fax: 403 720 2224

COMMERCIAL CREDIT APPLICATION

DATE: _____

1) LEGAL CORPORATE NAME: _____

TRADE NAME: _____

BUSINESS ADDRESS: _____ YEARS IN BUSINESS _____

CITY: _____ Postal Code: _____

PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

2) ACCOUNTS PAYABLE CONTACT NAME: _____

PHONE: _____ FAX: _____

PRINCIPLES OF OFFICERS OF THE COMPANY

NAME: _____ TITLE: _____

NAME: _____ TITLE: _____

3) BANKING INFORMATION:

BANK: _____ PHONE: _____

ADDRESS: _____ ACCOUNT #: _____

4) TRADE REFERENCES/SUPPLIERS: (Please supply at least three)

PHONE: _____ FAX: _____

PHONE: _____ FAX: _____

PHONE: _____ FAX: _____

Do you require that purchase order numbers be shown on invoices? (Yes/No) _____

Do you require monthly statements? (Yes/No) _____

Cal-Gas will investigate personal history on the principles of an unincorporated company in the event of default. It is agreed by the applicant(s) that an interest charge of 2% per month, 26.82% per annum, is and will be payable by the applicant on all overdue accounts from the due date.

DUE DATE IS 30 DAYS FROM THE DATE OF INVOICE

As authorized agents of the company, I/We agree to the terms and conditions outlined herein:

Signature: _____ Date: _____

Witness: _____ Date: _____

Please fax completed application to 780 865 5837
Or by mail to 148 Steele Crescent Hinton, AB T7V 2G5